



THE EXPERIENCES, CHALLENGES AND COPING STRATEGIES OF FATHERS,
PARENTING CHILDREN, ABUSING ILLEGAL SUBSTANCES: SUGGESTIONS FOR
SOCIAL WORK SUPPORT

by

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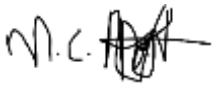
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MAY 2020

DECLARATION

I declare that the above dissertation is my own work and that all the sources that I have used or quoted have been indicated and acknowledged by means of complete references.

I further declare that I have not previously submitted this work, or part of it, for examination at the University of South Africa for another qualification or any other higher education institution.

Signature: The signature is handwritten in black ink. It appears to be 'M.C.' followed by a stylized, somewhat circular flourish that ends with a horizontal line.

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ABSTRACT

The proposed research aims to explore and describe the experiences, challenges and coping strategies of fathers, parenting children, abusing illegal substances. The use and abuse of illegal substances became national and global dilemmas. The impact and damage caused when drugs are widely used over time is irreversible, as it influences the lives of users and those of their families, their communities, and the country. This research provides an opportunity for fathers, parenting children, abusing illegal substances to share their experiences and challenges. Data are collected by conducting in-depth and face-to-face interviews with the participants. The collected data are analysed by following the eight steps of Tesch in Creswell (2009:186). Data are analysed using Lincoln and Guba's model of trustworthiness of qualitative research for validation. The study endeavours to obtain an understanding of the experiences and challenges encountered by fathers, parenting children, abusing illegal substances and how social workers could assist in addressing this dilemma.

Key Words: Challenges, children, coping, experiences, family, fathers, illegal substances, parenting, substance abuse.

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CHAPTER 1: GENERAL ORIENTATION TO THE STUDY

1.1 Introduction

Illegal substance abuse amongst adolescents is a critical global public health concern. Various countries experience a rise in alcohol and illicit drug abuse amongst adolescents (Hunter, Obeng & Ogah, 2017:2). For instance, the results from the Global School-Based Health Survey indicated a prevalence of tobacco use (12,6%), alcohol use (6,6%), and illicit use (10,5%) amongst adolescents attending schools in African countries, such as Kenya, Namibia, Swaziland, Uganda, Zambia and Zimbabwe. Substance abuse amongst adolescents increases daily, becoming more widespread in South Africa. For instance, Marijuana use amongst adolescent is extreme across provinces, except in the Western Cape where treatment demand for methamphetamine substantially increases (Whiting, 2014:5). Masombuka (2013:3) affirms that Marijuana is increasingly abused by youths between the ages of 14 and 17.

Masombuka (2013) conducted a study in the Soshanguve township in Pretoria, Gauteng, South Africa. The study focused on parents' experiences and support need regarding their children's addiction to *nyaope*. A motivation to conduct the study was to explore parents' experiences and support requirements regarding their children's *nyaope* addiction. The study of Castro-costa, Ferri, Lima-costa, Zaleski, Pinsky, Caestano and Lanjeira (2006:1601) on alcohol consumption in Brazil, established an association between early exposure to violence and substance misuse in adult life. Drug-dependant individuals in Iran was estimated at 500 000 to 1 700 000.

Some studies on substance abuse established that the age of susceptibility and drug use is the transition period from mid to late adolescence into early adulthood (Mirlashari, Demirkol, Salsali, Rafley & Jahanbani, 2012:461). Vakalahi (2001:29) asserts that during the 1980s, approximately 5% of adolescents aged 14 to 18 experienced drug-related difficulties and required treatment. In recent years, this percentage increased to 10% of adolescents requiring treatment for substance abuse.

Illegal drug abusers' family members are enforced with emotions of helplessness, frustration and doubts, contributing to increasing anger and hostility (Mak, Ho, Thomas, Schooling, McGhee & Lam, 2010:2). Most drug abusers are associated with crime-related

activities, as they behave aggressively towards other people attributable to their addiction (Hoeck & Van Hal, 2012:11). Family members residing with and fostering individuals, abusing illegal substances, experience shame and guilt; they are a mostly a hidden and isolated group. For instance, the study conducted by the Department of Social Development in the National Drug Master Plan (2013-2017:2) reveals illegal substance abuse negatively influences the users' families and communities where they reside. Socially, the families of individuals, using and addicted to illegal substances, experienced severe financial pressure attributable to the costs associated with theft from family, legal fees for users, and the high costs of treatment (The National Drug Master Plan, 2013-2017:2).

A relationship was established between illegal substance abuse and aggressive behaviour, as families of illegal substance abusers are often victims of violence; they have objects thrown at them, are burned with hot water, and threatened with a firearm or a knife within the household by the substance users (Sommer, Hinsberger, Elbert, Holtzhausen, Kaminer, Seedat, Madikane & Weierstall, 2006:30; Madruga, Laranjeira, Caetano, Ribeiro, Zaleski, Pinsky & Ferri, 2011:253). In South Africa, for instance, the relationship between the child and parents holds a significant function in the child's life decisions, such as abusing illegal substances (Mak et al 2010:2). The behaviour of individuals, abusing illegal substances, may force parents to exercise harsher control as parents may sense their parenting is inadequate.

Although much was converse about mothers and their experiences of parenting children, abusing illegal substances, there seems to be a lack of knowledge concerning fathers' experiences (Zanoni, Warburton, Bussey & McMaugh, 2014:84). The study by Klein, Pope and Tan (2009:300) further confirms that the research about the fathers' functions in their adolescent children's lives were neglected attributable to the scarcity of information on the participation of fathers (Klein et al 2009:300). In a study conducted by Fyle-Thorpe (2017:1), fathers were identified as a vulnerable group, experiencing stress, negatively influencing their parenting, risking frustration, especially those with a low income.

Fathers are more prone to become emotionally overwhelmed when experiencing distress, resulting in a tendency to respond by withdrawing (Muchiri, 2015:2). "fathers are increasingly included in family-based parenting outpatient programs that use a combination

of parent and family session” (Torres, Sng & Deane, 2015:275). Fathers of adolescents abusing illegal substances, attending programmes are reported to experience severe levels of parenting stress; they may realise needing assistance (Torres et al 2015:274).

According to Stover and Kahn (2013:85), parenting becomes more difficult for fathers, parenting children, abusing illegal substances when they exercise harsh discipline techniques on their children; they adopted and adapted from their family of origin. Parenting becomes a challenge to fathers of illegal substance-abusing adolescents, as they are restricted and limited to various social and cultural factors, preventing their voices from being heard. (McDougal & George, 2016:526). ‘Imprisoned’ fathers, for example, are obstructed from fulfilling their functions and supporting their children emotionally, resulting in behavioural difficulties in their adolescent children, such as drug abuse (Matshaba, 2016:49). Attributable to the changing expectations concerning males, most fathers sense pressured to be more involved and responsive parents, whilst continuing to provide for their families (Scott, 2013:66).

According to Stover et al (2013:2292), fathers, parenting children involved in illegal substance abuse, experience a significant shame and guilt about the harm and disappointment they caused their children. Instead of blaming their children for their behaviour, they blame themselves for lacking parental skills and confidence. Such fathers desire to be proficient fathers to their children. According to them, this is achieved if their children behave well, refraining from using or abusing illegal substances.

The relationship between the child and parents holds a crucial function in the child’s decisions regarding life, such as abusing illegal substances (Mak et al 2010:2). According to Stover and Kiselica (2016:3), substance abuse amongst adolescents is associated with neglectful and aggressive parenting, more negative father-child interactions, and less responsible fathering in the delivery of economic resources. Shirani, Henwood and Coltart (2012:27) established that male parents are inadequate risk-managers; they cannot be fully trusted in parenting. This cause immense pressure on fathers to provide the best for their children ensuring their children’s long-term success and well-being. A low level of satisfaction among fathers is often associated with less supportive parenting and harsh discipline methods. Families of fathers who abuse substances are more susceptible to

problematic parenting and negative child development (Watkins, O'Farrell, Suvak, Murphy & Taft, 2009:1).

Paternal substance abuse equates to difficulties in childcare and deficient child healthcare outcomes, requiring careful assessment to protect children from their fathers, the paternal substance abuse, and the wider social environment where the family resides (Huxley & Foulger, 2008:10).

A study by Kachadourian, Eiden and Leonard (2009:920) on fathers abusing alcohol by revealed their children, are at an increased risk for several challenges, including illegal substance abuse. Paternal substance abuse is associated with higher levels of parental aggression and parent-child conflict, which may lead to illegal substance abuse amongst children. Stover and Kahn (2013:8) observe that substance-abusing fathers indicate less sensitive parenting with greater negative father-child interactions. There is also less family cohesion and problems in parent-child interactions for adolescents with fathers who abuse substances. Parents in low-economic conditions find it difficult to meet their family's needs, leaving children unattended, exposing them to negative behaviour, such as illegal substance abuse (Cottee & Roman, 2013:27). Environmental conditions, such as overcrowding and a lack of financial resources within a family, contribute to the increased risk factors for adolescents. The study suggests that adolescents living with their fathers are more prone to good physical and emotional health and will surpass at school, eluding drugs, violence and problematic behaviour (Cottee & Roman, 2013:28).

The experiences of fathers in the 21st century seem to change attributable to factors, such as mother-headed households, restricting several fathers' involvement in their children's lives (Stahlschmidt, Threlfall, Seay, Lewis & Kohl, 2014:2). With the evolving nature of the family, more females have a career outside their home, changing the traditional function of fathers and how fatherhood is perceived. Traditionally, fatherhood meant the ability of males to provide for their family financially, whereas modern expectations include males' direct involvement in children care. It is further contended that mothers staying with their children, may function as 'gatekeepers', encumbering fathers efforts to maintain contact with their children, endangering a meaningful relationship.

It was also the primary responsibility of fathers to ensure their children are raised with an appropriate sense of values (Lamb, 2010:2). Fathers were traditionally observed as

patriarchs exerting enormous power over their families (Lamb, 2010:2). Father-involvement is usually associated with children's life satisfaction and their experiences of less depression; superior problem-solving and adaptive skills; and being more attentive, resourceful, playful and skilful when confronted with challenges (Allen & Daly, 2007:3). Matshaba (2016:47) also asserts the following:

A father plays an important character in promoting social-emotional, cognitive, language, and motor development in the lives of their children; and also argue that, early involvement by fathers in their children's lives provides an emotional security, high level of secure attachment, problem solving approach, self-esteem, social competence, life skills, ability to control their emotions during physical activities and assist them in psychological maladjustment during their adolescent stage.

The absence of fathers has a negative contribution to children's future. Some children were reputable to struggle with behaviour; they, therefore, end up abusing illegal substances. Parental support significantly decreases the risk of substance abuse (Allen & Daly, 2007:3).

From the aforementioned discussion, it is apparent that fathers in contemporary society and modern times experience challenges in raising children, abusing illegal substances. Some of the identified challenges include, but are not limited to, the following: the expectations to learn attitudes and techniques different from those of fathers in the previous era; raising children largely influenced by external sources such as schools, friends, social media, movies, music, books and travelling; and unrealistic expectations, resulting in anxiety and guilt (Joseph & John, 2008:18).

1.2 Problem statement

The problem statement is the purpose of the study and therefore the most important statement in a qualitative study because it should indicate the core of the study (Creswell, 2016:94). It should provide a clear description and explanation of the reasons for pursuing the study. It should further include a statement of how the study will contribute to the general body of knowledge (Moule & Goodman, 2014:27). Fathers, parenting illegal substance abuse children, are regarded as the most under-represented group in empirical studies (Kumus, cited by Van der Westhuizen, 2007:70).

Although much was constructed concerning mothers and their experiences regarding parenting children, abusing illegal substances, there is a dearth of knowledge concerning fathers' experiences (Zanoni et al 2014:84). Mothers are observed as capable of controlling

and shaping the lives of their children. Often little is alleged concerning fathers' functions and experiences (Shirani, 2012:26). A lack of consideration of fathers and the challenges they encounter is identified (Gillum, 2007:1; Hartley & Seltzer, 2012:328). For instance, little is known about how fathers manage their parenting responsibilities (Whitehead, Ashbourne & Hawkins, 2008:1). Klein et al (2010:300) stipulate that "the study of fathers' participation in child development is neglected; there is a scarcity of information on their roles in the functioning of their children". Most studies focus on the mothers of adolescents regarding monitoring and behaviour, whilst less is known about the fathers' monitoring and behaviour and their ability to raise children (Cadwell, 2011:299).

Little is known or researched about fathers' personal experiences in dealing with children's illegal substance abuse (Gillum, 2007:1). The fathers' opinions and life experiences of parenting a child, abusing illegal substances are crucial, as they support the development and effective support systems for the child and the wider family unit (Mount & Dillon, 2014:70). It is further contended that mothers know more about their adolescent children's daily activities, such as whether they are abusing illegal substances. Their contributions or influence differ causing fathers to step aside, rendering them less important in their children's lives (Ngamiye & Yadufashije, 2016:4597). The authors are of the view that mothers' and fathers' contributions differ, whereby fathers' functions in their children's lives are limited and at times unappreciative.

The problem statement for this study is the following: Despite the existence of an enormous number of studies on substance abuse and related concerns, little was researched regarding the experiences and challenges encountered by fathers, parenting children, abusing illegal substances.

1.3 Motivation for the study

Three important reasons served as motivation for this study, indicating the researcher's work practice; the researcher's desire to satisfy an intellectual query; and the dearth in the literature regarding fathers, parenting children, abusing illegal substances. As a social worker providing services to drug addicts and users in a rehabilitation centre, the researcher often encounters fathers, frustrated by parenting children, abusing illegal substances. One of the major challenges for fathers whose children are illegal substance abusers is experiencing social pressure from their families and communities to discipline

their children. In this community where the researcher is working, illegal substance abuse by children is observed as a sign of failure and irresponsible parenting. The experiences of these fathers are captured in the following phrase by Choate (2015:462):

Fathers of children who are using illegal substances are torn between wanting to provide support for their drug affected child and needing to ensure a stable environment for their other children whose peaceful use of the family home was affected.

Conversely, these fathers are perceived as less important and irrelevant to the protection of their children (Scott, 2010:5). Stahlschmidt et al (2014:1734) assert that fathers of adolescents, abusing illegal substances, experience challenges, particularly because of the changing nature of families. Most females now have a career and this altered the function of the father traditionally. Poverty contributes to the challenges fathers' experience, as they do not know to focus on their children illegal substance abuse or to find ways of providing for the entire family. Provided substance abuse in families, social workers must acquire an understanding of the experiences and challenges of fathers, parenting children, abusing illegal substances.

The study was also motivated by the need to satisfy an intellectual query to undertake this research. Being a resident in a community where substance abuse amongst children is rife, the researcher was eager to learn how fathers cope with the concern of their children, abusing illegal substances. Within several communities, fathers are observed as powerful individuals, consequently, the researcher wanted to know how they cope with that stereotypical reasoning when they encounter the challenges of parenting children, abusing illegal substances. Conversely, fathers whose children are illegal substance abusers also find themselves in the situation where their children abuse illegal substances, but they are expected to discipline their children effectively, preventing engagement in these behaviours.

An additional reason for pursuing this study was because little was provided in the literature regarding fathers, parenting children, abusing illegal substances. Instead, most studies conducted on illegal substance abuse by children focused on mothers, parenting children, abusing illegal substances, and their experiences and challenges. Limited research exists regarding the effects of children's substance dependence on parenting and family functioning, especially on the experiences of the male parents. Various articles were therefore consulted, relating to the topic under study; amongst those perused, are the following: Groenewald and Bhana (2017); in the study, the authors focused on mothers'

experiences and coping responses in parenting adolescents involved in substance abuse, and how that significantly impact their lives. The authors state that mothers use problem-focused and emotion-focused coping in various combinations of withdrawing, tolerating and engaged coping responses; Schmidt, Zabkiewicz, Jacobs and Wiley (2007) examine the focus of this study concerning the impact of substance abuse by children and how substance abuse can influence their work. The study focused on the mother's experiences regarding work history and family size.

Short, Gannon, Weingarten, Kaltenbach, LaNoue and Abatemerco (2017) focused on evaluating mothers' stress levels, whilst parenting misbehaving children the support received through the mindfulness-based parenting intervention. Their parenting and interaction with their children abusing substances, and how that could influence the uptake of high-risk behaviours were analysing; De La Rosa, Dillo, Ganapeti, Rojas, Pinto and Prado (2012)¹ the study focused on the mother-daughter relationship, and the influence of substance abuse on the relationship; it concerns the mother as non-user and daughter as the abuser.

Cleaver, Unell and Aldgate (2010:1) refer to families experiencing challenges, including mental illness or learning disability, problem drinking and drug abuse, or domestic violence whereby females are the most vulnerable as they have to ensure that everyone in the family is protected and safe, creating additional stress. Tedgard and Rastam (2016) identified symptoms of depression and anxiety in mothers exposed to substance-abusing children, severely disrupting their guardianship abilities. In this regard, it was established that children grow up with insufficient parental care leading to substance abuse. Niccols, Milligan, Sword, Thabane, Henderson and Smith (2011) observed how mothers can re-build their relationship with their children wrecked, attributable to substance abuse.

1.4 Theoretical framework

A theory is an attempt to develop an explanation for a phenomenon (Best & Kahn, 2006:12). Green (2013:34) defines theory as follows:

An organised and systematic set of interrelated statements that specify the nature of relationships between two or more variables, with the purpose of understanding a problem or the nature of things and concepts as symbolic statements describing a phenomenon or a class of phenomena.

A theory is also a network of interlinked concepts, providing an understanding of a phenomenon or phenomena (Jabareen, 2009:51). A theory's main function is to guide researchers in ensuring their work is coherent (Blumberg, Cooper & Schindler, 2011:36). In the social sciences, a theoretical framework includes the researcher's observations on the researched topic (Green, 2013:35). Employing theory in qualitative research is not to test a hypothesis, but to generate a hypothesis based on the acquired information (Goldkuhl & Cronholm, 2010:190; Creswell, 2016:43). Others contend that if researchers, regardless of the approach, disregard existing theories they are prone to "reinvent the wheel" (Goldkuhl & Cronholm, 2010:191).

This study employed the Schlossberg Transitional Process Model, as it was consistent with the goal of the study, developing an in-depth understanding of the experiences, challenges and coping strategies of fathers, parenting children, abusing illegal substances. In Schlossberg's theory, the focus is on change and how individuals differ in their ability to adapt to change. As individuals move through life they continuously experience change and transition. These changes often result in new networks of relationships, new behaviours, and new self-perceptions (Schlossberg, 1981:2). Schlossberg (1981:4) further contends:

that a person's situation varies according to what triggered the transition, the timing, the amount of control the person has over the transition, the new roles the individual is taking on, the duration of the transition, one's previous experience with a similar transition, how the individual assesses the transition, and other stresses the individual is experiencing.

Schlossberg's Transitional Process Model was relevant in this study, focusing on adults' experiences, whilst coping with the regular and unusual process of living (Scholssberg, 2011:159). For instance, it differentiates between the unanticipated, anticipated and non-event and transitions. The unanticipated occurs when some events in life occur unexpectedly; the anticipated transition refers to events adults expect to occur; non-events are events an adult expects to occur, which do not occur (Schlossberg, 2011:159).

This study focused on unanticipated transitions. Fathers, parenting children, abusing illegal substances, are disappointed and shocked. They did not expect their adolescent children to abuse illegal substances. The anticipated their children to study, be disciplined, display upright manners, engaging in teenage activities, which do not involve illegal substance. The contrary occurs with children's involvement in abusing illegal substances. Fathers consequently experience too much stress, pressure and strain, causing strained coping.

Schlossberg (2011:160) contends that individuals differ in how they cope in similar situations, managing a transition but are ineffective in another. The following four S-strategies could assist in understanding how individuals contest transitions:

- situation - refers to the individual's situation during the transition
- self - indicates the individual's inner strengths, managing the situation
- support - focuses on support during life transition
- strategies - this is the period where various strategies are applied to combat the transition

The coping theory was also applied in the study to understand how fathers, parenting children abusing illegal substances, deal with or manage the stressors. The coping theory focuses on how individuals manage or cope with their day-to-day challenges (O'Driscoll, 2013:89). The inherent assumption of this theory is that individuals cannot avoid stress in their lives, but they can learn to deal and cope with it if they find themselves in stressful situations. Zaumseil and Schwarz (2014:46) define coping as follows:

An adaptive process associated with a potentially long-term series of interactions with a potentially challenging environment. And these approaches take into account the fact that a series of stressful episodes can lead to changes, both in the individual and in the environment, itself.

In this case, the fathers, parenting children, abusing illegal substances, experience vast changes in their lives and functions as fathers, attributable to the strain caused by their adolescent children. These fathers and the entire family and community they live in are also encountering strain. The community has certain expectations of the fathers regarding their children, which may be unrealistic in the specific circumstances. These expectations cause enormous stress on the fathers, parenting children, abusing illegal substances when their attempts fail. This causes further difficulty for them to cope with the changes in their lives.

1.5 Research question, goal and objectives

Doody and Bailey (2016:19) indicate the first stages in their study were to develop the research question, aim and objectives. If the studies are to be successful the research questions, aims and objectives should be directed. The subsequent phases evolve from the research question, goal and objectives; they govern the choice of population, setting, data to be collected and research period (Parahoo, 2014:14).

1.5.1 Research question

Contrary to quantitative research, qualitative research poses a broad and general question, allowing the participants to explain their ideas (Creswell, 2009:141). It is common practice in a qualitative study to employ a research question to guide the study, in preference to a hypothesis, because a research question is ideal in addressing and exploring inadequately researched challenges (Picardi & Masick, 2014:18). A research question assists the researcher in navigating through the research process (David & Sutton, 2011:12). In this study, research questions were formulated, enabling attaining the relevant information concerning fathers coping strategies observing parenting children, abusing illegal substances.

A well-formulated research question should enable the ensuing the research aim. Even during challenging times, avoiding unnecessary modifications during the research process (Maree, Creswell, Ebersohn, Eloff, Ferreira, Ivankova, Jansen, Nieuwenhuis, Pieterse, Piano Clark & Van der Westhuizen, 2010:3). The research question should emphasise what intrigues the researcher, direct the researcher to appropriate literature resources, providing a focus for data collection.

The research questions for the study were formulated as follows:

- What are the experiences, challenges and coping strategies of fathers, parenting children, abusing illegal substances?
- How would fathers, parenting children, abusing illegal substances, like to be supported by social workers?

1.5.2 Research goal and objectives

A goal is defined as the “overarching purpose of the research project, which set the stage for the objectives of the study”, and it is something that the researcher wants to achieve (Thomas & Hodges, 2010:38). Fouche and De Vos (2011:108) assert that a goal is the central thrust of the study. Conversely, an objective is comprehended as the course of action to reach the goal of the study, because it explicitly outlines how the goal will be achieved (Attig & Winichagoon, cited by Liamputton, 2013:270).

The study had two goals, indicating the following:

- develop an in-depth understanding of the experiences, challenges and coping strategies of fathers, parenting children, abusing illegal substances and their requirements for support by social workers.
- suggestions on how fathers, parenting children, abusing illegal substances could be supported by social workers.

The following research and task objectives were formulated to achieve the aforementioned goals:

- Obtain a sample of participants, comprising fathers, parenting children, abusing illegal substances, residing in Kagiso in Gauteng. Permission was sought from the local authorities and it was duly granted (Addendum D).
- Conduct face-to-face, semi-structured interviews with open-ended questions contained in an interview guide, with a sample of fathers, parenting children, abusing illegal substances.
- Explore the experiences, challenges and coping strategies of fathers whose children are using illegal substances, and their requirements for support by social workers.
- Peruse, sort and analyse the data obtained according to the eight steps of qualitative data analysis constructed by Tesch (in Creswell, 2013:46).
- Describe the findings regarding the experiences, challenges and coping strategies of fathers, parenting children, abusing illegal substances, and their requirements for support by social workers.
- Interpret the data and conduct a literature control to support/confirm and/or compare research findings.
- Conclusion and recommendations on the experiences, challenges and coping strategies of fathers, parenting children, abusing illegal substances, with suggestions for social work support.

1.6 Ethical considerations

A qualitative researcher must consider the ethical aspects of research. The main purpose of research ethics is to protect the well-being of the participants during and after the study. Ethics involves an awareness of scientific misconduct and plagiarism (David & Sutton, 2011:30). Research ethics include obtaining letters of consent, permission to be

interviewed, and an undertaking to destroy the interview audio recordings on completion (Maree et al 2010:241).

Ethics indicates conforming to the standards of conduct of a provided profession or group (Babbie & Mouton, 2012:87). Bryman (2012:135) maintains ethics are principles in social research, divided into areas guiding the study concerning harm to participants, invasion of privacy, and deception. The basis of ethical decision-making in social research includes a commitment to participants' rights and to respect participants, including a commitment to knowledge, whilst protecting the researcher (Robson, 2011:197).

In this study, approval was obtained from the Research Ethics Review Committee to conduct the research (Addendum F). The study focused on the following ethical aspects in ensuring respect for human dignity: obtaining informed consent, the concern of confidentiality and anonymity, and information management.

1.6.1 Informed consent

In qualitative research, informed consent is observed as a way contributing to the empowerment of participants, allowing them to decide whether to participate in the study (Glense, 2011:166). Informed consent indicates that the researcher provides detailed and clear, factual information to the participants on the study, its procedures, potential harm, and benefits. Informed consent involves assuring participants the right to refuse or withdraw from the study without intimidation or threats (Bordens & Abbott, 2014:194).

The researcher should not continue with the work unless informed and voluntary consent was obtained from participants. In this study, the participants were allowed the rights and freedom to choose to participate in the study without any coercion. The participants were provided with a letter, outlining important details of the study; the participants had to formally agree in writing to be part of the study of their own free will, upon familiarising themselves with the study content (Addenda A & C). The participants had to understand their commitments; participation forms had to be signed and dated by the participants to indicate consent. It was important to use simple and clear language in the forms for the participants to understand (Krathwohl, 2009:209). During the recruitment stage, it was explained in detail to the participants that their participation in the study was voluntary and they had the right to choose to participate.

1.6.2 Confidentiality

Confidentiality indicates the researcher promises not to share or divulge any information shared by the participants (Goredema-Braid, 2010:51; Vogt, Gardner & Haeffele, 2012:24). Confidentiality emphasises that “the research project guarantees confidentiality when the researcher can identify a provided person’s responses but promises not to do so publicly” (Babbie, 2007:65).

Data were collected for the study with the consent of the participants. Findings were reported on and published without divulging details or information referred to.

1.6.3 Anonymity

Anonymity is a way of maintaining confidentiality, whilst protecting the identities of the research participants. Anonymity indicates that the names of participants may be changed. Cautions were used discussing participants and the setting of the work or where interviews were conducted (Berg, 2009:90; Thomas, 2016:82). Anonymity is a mechanism through which confidentiality is maintained.

In this study, anonymity was applied through employing codes to refer to participants in preference to their actual names, protecting their identity. The location where interviews occurred was concealed and not revealed to outsiders therefore no one could trace participants’ identities.

1.6.4 Participant debriefing

Debriefing is a session conducted upon completion of the fieldwork. The session considers two important aspects. First, the researcher will learn from listening to the opinions of the participants. Secondly, the researcher must support participants coping with negative emotions experienced during interviews, particularly when exposed to difficult situations (Babbie & Mouton, 2012:256). Beins (2013:45) also concedes that debriefing is about the researcher informing participants of the purpose of the research after the project, whilst providing participants an opportunity to direct questions about the research.

Participants were provided attention and counselling where needed, in particular those whose emotions were triggered by the interview contents. Participants were debriefed

upon conclusion of the study. Arrangements were made with a qualified therapist to debrief the participants who needed it (Addendum D).

1.6.5 Information management

Information management indicates that the researcher should protect and ensure the information collected during the study was kept in a secured place, avoiding accidental exposure to the public. It is also a promise by the researcher not to discuss information obtained during the study. Special codes for the participants' real names, such as pseudonyms or case numbers, were created when reporting (Berg, 2009:92). It would be appropriate to destroy the transcripts and audiotapes immediately after project completion (Walliman, 2011:260; Thomas, 2016:83).

During this study, audio recordings were kept in a secured place. Participants' names were kept confidential and interview information collected were not shared with anyone, apart from the supervisor and relevant professionals. Information was not shared with the family members of the participants unless consent was received for such disclosure.

1.7 Clarification of key concepts

Definitions of key concepts and an explanation of how they were employed in the study are provided below.

1.7.1 Challenges

For this study, challenges refer to the factors threatening the well-being of family life during adversity, risking the lives of the family members. Barriers to the family's healthy relationships and communication patterns strain the capacity of the family to function (Xie, Xia & Zhou, 2004:207). In the case of this study, challenges refer to the fathers experiences, parenting children, abusing illegal substances, and how they cope with such unpleasant experiences.

1.7.2 Children

A child is defined as a person under the age of 18 years (Children's Act 38 of 2005; Pretorius, Mbokazi, Hlase & Jacklin, 2012:8; Precu, 2017:72). Any person 25 years or older may still be perceived as an adult child by parents (Reczek, Liu & Umberson, 2010:1205).

According to Erikson's developmental stages, an adult child is an individual who passed through the adolescent stage, who can establish in-depth relationships (Parrish, 2010:69). In the study, the concept 'child' refers to individuals between the ages of 18 and 30, full-time residing and depending on their parents.

1.7.3 Coping

Coping refers to the efforts people employ to manage situations appraised as potentially harmful or stressful. The concept is also defined as an active effort to master, reduce, or tolerate stress created demands (Brown-Baatjies, Fouche, Watson & Povey, 2006:126). Another definition is a process of trying to manage the internal and external challenges posed by a troublesome situation. The dimensions of coping serve two functions, indicating *problem-focused* coping involving specific strategies for confronting and resolving the problematic situation, whilst *emotion-focused* coping involves managing internal emotional reactions to the situation (Sternberg, 1998:681). For this study coping refers to strategies fathers adopt to deal and cope with their children, abusing illegal substances.

1.7.4 Experiences

Experiences indicate knowledge of the event through participation or exposure, which includes emotions, attitudes, behaviour, perceptions and needs (Grobler, Schenck & Mbedzi, 2013:48). Parrish (2010:144) defines experiences as individuals' perspectives on events and their meanings. The concept 'experiences' in this study refers to how fathers of children, abusing illegal substances feel, handle and cope with the challenges they encounter regarding their children's abuse.

1.7.5 Family

Family is defined as a societal group related by blood (kinship), adoption, foster care, or the ties of marriage (civil, customary or religious), civil union or cohabitation, beyond a particular physical residence (DSD, 2012). According to Giddens (2006:206), family refers to a group of people directly linked by kin connections, the adult members, which assume responsibility for caring for the children. A family also refers to the biological, legal, or social network constructed by larger social networks and philosophical ideologies (Tjale & de Villiers, 2014:166). A family is "an organized network of socio-economic and reproductive interdependence and support grounded in biological kinship and marriage" (Thatcher,

2007:6). In this study, family refers to individuals, related through blood, residing under the same roof on a full-time basis, comprising a mother and a father with their children or a father and his children.

1.7.6 Father/s

In this study, 'father' indicates a biological father unless otherwise specified. In the black African society, the term father is not exclusive to biological fathers. Extended male family members, such as uncles also fulfil this position (Nduna & Sikwayiya, 2013:537). In this study, 'father' refers to the biological father, married and single; whose children are using illegal substances. Fathers in this study reside with their children, under the same roof for at least a year.

1.7.7 Illegal substances

Illegal substances are psychoactive substances. The production, sale or uses of these substances are prohibited (DSD, n.d.:19). In this study, illegal substances refer to any substances illegally used by adolescents, which change their lifestyle and behaviours in such a manner that it becomes difficult for their fathers to exercise discipline.

1.7.8 Parenting

According to Butler and Roberts (1997:66), parenting changes across cultures and cannot solely be defined by the context of own experience and personal construction of family life. Individuals are motivated to become parents for various reasons, such as personal fulfilment, to please a partner, for immortality attributable to failed contraception, and to complete a family. De Witt (2009:264) contends that parents provide the basic foundation that the child needs to be a functioning adult. In this study, parenting indicates taking care of biological children, financially, emotionally and spiritually by the biological parents residing with those children under the same roof for at least one year.

1.7.9 Substance abuse

Substance abuse constitutes to the abuse of legal or illegal substances, such as nicotine, alcohol, over-the-counter and prescription medication, alcohol concoctions, indigenous plants, solvents and inhalants (DSD, n.d.:19). Substance abuse is defined by Whitesell, Bachand, Peel and Brown (2013:12) as:

An extreme diagnosis wherein use of the substance is reoccurring to the point of reducing important social and occupational activities, causing tolerance of the substance and/or withdrawal symptoms and causing the user to devote a great deal of time to obtain and use the substance.

In a study by the World Health Organisation (WHO) (WHO, n.d.), the concept of substance abuse refers to the harmful use of psychoactive substances, such as alcohol or illegal drugs. It further contends that substance abuse is a set of symptoms indicating continued use of a substance; despite the huge problems it causes (Baconi, Ciobanu, Vlasceam, Cobani & Negrei, 2015:25). In this study, substance abuse is the abuse of illegal substances by teenagers. The substance abuse becomes evident when a continuation of the abuse interferes with their ordinary responsibilities, such as their education, health, and love life.

1.8 Structure of the report

This study is divided into the following chapters:

- Chapter 1: General orientation of the study

This chapter provides an introduction and general orientation to the research, focusing on the following:

- introduction and problem formulation
- problem statement
- rationale for the study
- research question
- goal and objectives
- research approach and design
- ethical considerations
- clarification of main concepts
- content plan of the research report
- Chapter 2: Theoretical framework

This chapter provides a brief discussion on how fathers, parenting children, abusing illegal substances, is conceptualised through various theories.

- Chapter 3: The application of a qualitative research process

This chapter includes a presentation of the application of the qualitative research process.

- Chapter 4: Presentation and discussion of the findings

In this chapter, the research findings are presented and subjected to literature control.

- Chapter 5: Summary, conclusions and recommendations

This chapter provides a summary of the research report with an outline of the conclusions and recommendations.

1.9 Dissemination of research results

The results of this research are available in the form of a dissertation submitted to the UNISA to be examined for academic degree purposes. This research was undertaken to obtain a postgraduate qualification in social work. The research article on this topic is constructed for publication in professional journals. The research findings are disseminated to relevant professionals in the form of articles. The articles are also submitted for review and publication in a professional journal after a thorough review by professional bodies.

CHAPTER 2: THEORETICAL FRAMEWORK

2.1 Introduction

Theory is an objective proposition comprising a logically coherent statement, serving as a guide for comprehending a phenomenon (Liesanmni, Ishola & Yusuf, 2013:2226). Theory has an important function in research, providing a framework, establishing the validity and significance of the study (Creswell, 2016:58). The “application of theory is necessary to advance knowledge from the hat is already known towards the next steps to be taken” (Angeles, Dolovich, Kaczorowski & Thabane, 2014:100).

Although the review of the literature before this study, may inform a new study, it may also inadvertently hinder the emergence of phenomena by creating an unwanted channel, which may lessen the value of conducting a qualitative study (Yin, 2011:61). Some authors contend that any review of the literature before conducting the study may “contaminate, constrain, inhibit, stifle or impede the researcher’s analysis of codes emergent from the data” (Mills, Bonner & Francis, 2006:30). Within qualitative studies, the aim is to enter the field of research with no preconceived ideas (Giske & Artinia, 2007:276; Bainbridge, Whiteside & McCalman, 2013:276). The authors caution that qualitative researchers should avoid reading pertinent or comprehensive literature until data collection was completed (Goldkuhl & Cronholm, 2010:188; Yin, 2011:62).

This chapter aims to provide relevant information on how fathers, parenting children abusing substances are conceptualised through diverse theories. It impossible for a single theory to address all concerns to explain a single phenomenon (Stryker, 2008:17) such as parenting children using illegal substances. The theories included in this chapter are not exhaustive. The theories are presented according to the definition, main assumptions, main features, and using it to explore and understand the experiences of parents whose children are using illegal substances.

2.1.1 Bronfenbrenner’s conceptual model

Urie Bronfenbrenner during the late 1970s incepted the Bronfenbrenner theory. According to Denis (2012:11), Bronfenbrenner's model illustrates the environment influences in developing human beings. This theory contends individuals belief meaning of their surroundings is impacted by their life experiences. Reality is a fluid and in a constant state

of change, based on experience. Beliefs change as humans interact with their environment and develop meaning regarding their existence according to these experiences. Concerning the study, the participants believe their children's illegal substance abuse is influenced by their relationship with their peers, illegal substance abuse links to peer pressure. Parents believe their children are engaging in risky behaviours resulting in negative influences from their peers. The children believe these peers help to shape their identity, whilst attempting new decision-making skills and peer acceptance and respect (Oliha, 2014:1).

- Bronfenbrenner's theory also focuses on adolescent development and how individual characteristics, contact and historical time mutually influence the development of the adolescent (Rosa, 2013:1). Bronfenbrenner's model divides an individual's environment into five interrelated systems, indicating the microsystem, mesosystem, exosystem, macrosystem and chronosystem (Ashiabi & O' Neal, 2015:1):
- Microsystem- refers to the relationships that the child has, such as the family, peer group or school setting. It is the setting where the individual lives. It is within the microsystem that most direct interactions take place. Drug abuse amongst other adolescents it is caused by parents' behavioural relationship, between parents and their adolescents, the relation between the parents, the family atmosphere and the economic standing of the family (Foo, Tam & Lee, 2012:2). This means, other factors such as family relations and family economic background influence and have an impact on the drug addiction of the adolescents. Some adolescents were raised in abusive families and that cause them to run to substances as a way of dealing with their family situations.
- The Mesosystem- describes interrelationships between different microsystems such as the relationship of family experiences to school experiences, school experiences to church experiences, and family experiences to peer experiences. According to El Kazdough, El-Ammari, Bouftini, El Kafir & El Achhab (2018:1) adolescents adopt various health risk behaviours, such as substance abuse through their interaction with their fellow peers; they acquire substances through experimentation and curiosity. For instance, having a family member abusing substances can also be a risk factor. To some adolescents, religiosity can also keep adolescents from taking substances, even when experiencing difficult situations (El Kazdough et al 2018:1).

- The exosystem- refers to the indirect effect on an individual's developmental outcome and is the setting where the individual does not actively participate (El Kazdough et al 2018:1). Having a family member who uses substances can be a risk factor for adolescents to use them; and later in life, they become dependent on substances (El Kazdough et al 2018:2) where adolescents grew up in families where other family members were substance abuse, they have more chance of substance abuse, even if they grew up not knowing how ruinous substances can influence their future.
- Macrosystem- it involves the society, includes cultural values, and describes the economic conditions under which families live, along with material resources, and opportunity structure. Conn and Marks (2015:5) contend several factors influence adolescents' susceptibility to abuse substance, such as family conflict, low parent bonding and peers drug usage. Adolescents are more exposed to media messages that normalise their use of substances and focuses on positive effects advertised on television and the Internet.

2.1.2 Ecological model

Bronfenbrenner's ecological model focuses on an individual's location and how a person's development can be changed over time within certain environments (Sunsern & Lawang, 2019:5). The authors indicate that each person holds four properties, specified as follows:

- disposition is the behaviour that can set and sustain, such as the interactions between the individual and other people and their environment
- bio-ecological is the person's ability, experience, knowledge and skills
- demand characteristics, referring to a person's capacity to discourage reactions with the social environment
- demographic characteristics of a person, such as age, gender, and ethnicity amongst other things. Moon, Patton and Rao (2010:839) assert that youths are more vulnerable to violence than other age groups as they are more prone to be involved in crimes.

The ecological model postulates that the social, physical and cultural aspects of an environment affect an individual's health (Golden & Earp, 2012:364). According to Daley (2012:364), substance abuse negatively impacts some families; some family members are directly influenced and become physically ill.

2.1.3 Socialisation model

The Socialisation Model was developed by the black criminologists W. B Du Bois, M. Work and E.F Frazier. Both criminologists employed various methods to explain crime amongst African people. Concerning this study, the participants' children are all involved in diverse forms of crime, ranging from stealing home appliances to stealing neighbours' belongings. Hoeck and Van Hal (2012:11) assert that most drug addicts are often associated with crime-related activities. Hirschi in 1969, comprehensively explained the socialisation model, still relevant today after 40 years of the theory's inception (Daramola & Osho, 2017:2). It is further believed that the individuals have bonds binding them to others. If the bond is weak or broken there is a likelihood that such individuals might engage in deviant behaviour.

According to Nzoka and Orodho (2014:87), the shortage of teachers in South African schools, the lack of basic facilities, community interferences, inadequate teaching methods and administration related factors, are contributing factors of schools functioning poorly. Mohammadpoorasl, Nedjat, Fakhari, Yazdani, Foroushani and Fotouhi (2012:40) contend that the adolescents' substance abuse links to health and productivity barriers, such as poor grades in schools and school dropouts. According to Mnguni (2014:1), children in South Africa today are better educated compared to the previous times. Conversely, there is a high number of school dropouts attributable to substance abuse, especially after Grade 9.

According to Peguero, Popp, Latimore, Shekarkhar and Koo (2010:2), schools are the institutions that influence youth development and their behaviour. For instance, a lack of student commitment, involvement and school acceptance is associated with an increase in school misbehaviour. Muoti (2014:3) asserts that drug abuse amongst youths is the origin of the problem in schools, leading to the high school dropouts and idleness amongst youths. Similarly, other authors add the following

Several school-going adolescents experience a mental health problem, either temporary or for a long period (Akanbi, Augustine, Theophilus, Muritala & Ajiboye, 2015:109). Some become insane, maladjusted to school situations and eventually drop from school. Most youths substance abusers display a decline in their academic performances, higher absenteeism, decreased schoolwork productivity and eventually dropout (Paolini, 2015:1).

2.1.4 Social learning theory

Social learning theory is premised on the belief that behaviour is a result of the person and situation; the two cannot be separated (Hanna, Critenden & Critenden, 2013:19). In some families, the structures changed from good to worse. Family relationships are destroyed. Families are damaged by their family member's substance abuse. According to Hoeck and Van Hal (2012:32), individuals living with and fostering substance abusers are often hidden in isolated groups, attributable to emotions of shame and guilt. Stahlschmidt et al (2014:1734) assert that fathers of adolescents abusing illegal substances, experience challenges, particularly because of the changing nature of families.

The focus of this theory is a comprehension of identifying individuals and changes in methods of thinking, emotions and behaviour (Aliakbari, Parvin, Heidari & Haghani, 2015:1). This notion agrees with the study as it focuses on the participant's emotions and behaviours. David (2016:40) contends that the environment contributes to behaviour. The author believes that behaviour and environment influence each other. The social learning theory, as theorised by Albert Bandura in the 1970s, suggests that individuals are capable of learning behaviours from others; they can model and observe behaviours (Goetzman, 2014:1).

2.1.5 The gateway or Generalisation model of problem behaviour

The gateway theory was studied since the 1970s; this theory suggests an adolescent's early experimentation of substances progresses to more addictive illegal substances in the adult stage. The theory focuses on the age onset of substance abuse as a proximate determination of future drug abuse and dependence in adulthood. The theory aims to examine the relationship between the adolescents using drugs and its impact later in their life (Nkansah-Amankra & Minelli, 2016:134).

Windle and Windle (2011:152) contend that early-onset problem behaviours in childhood and early adolescence, such as stealing and drug use, commonly associate with the development of substance abuse disorders and criminality in early adulthood. Adebayo (2013:1) concedes that crime causes immense personal suffering, material damage, reduces the quality of life, whilst damaging the relationship between individuals. "The

younger an individual is at the onset of the substance abuse, the more risk developing substance abuse disorders continue into adulthood” (Mohammadpoorasl et al 2012:40).

The gateway model suggests community programmes focusing on preventing substance abuse in the youth by increasing testing. Effective preventive intervention addressing risk factors for adolescent problem behaviours, prioritised by the community, should be further implemented to reduce the high substance abuse amongst youths (Hawkins, Oesterle, Brown, Abbott & Catalano, 2014:122).

Prevention programmes are pivotal to the families, schools or communities in addressing and disseminating appropriate information, such as assisting youths to recognise and resist pressures to engage in drug use, comprehensive personal and social skills training to build resistance, deliver information through interactive methods and cultural sensitivity (Chakravarthy, Shah & Lotfipour, 2013:1021). According to Prendergast (2009:4), youths at risk of substance dependency, relapse from drug abuse. An ongoing need exists for diverse preventive programmes to avoid the consequences of substance abuse.

2.1.6 Conceptual model of substance abuse amongst the youth and Bronfenbrenner’s theory

The conceptual model review employs various theoretical approaches, such as psychoanalytical, behavioural and social learning, biological, cognitive and systems theories, to identify the individual and environmental influences on child development (Cooley-Strickland, Quille, Griffin, Stuart, Bradshaw & Furr-Holden, 2009:1) This theory suggests employing planning to improve adolescent’s experiences and education, in particular, substance abuse. The problem of access to and delivery of high-quality services to youths remains (Krishnan, 2010:3).

The whole family endures the effect of substance abuse (Lader, Howsare & Byne, 2013:194). Staggy (2017:363) asserts that the conceptual model relates to an emerging research project. This study endeavoured to disclose the experiences, challenges and coping strategies of fathers, parenting children, abusing illegal substances.

2.1.7 The family systems theory

The family systems theory is useful for the human service and clinical professionals, caring for and working with children and their families (Barreto, 2014:1). The family system is complex and cannot be understood by examining members separately. Each family system constantly adapts to maintain itself in response to its members and the environment. Erdem and Safi, 2018:1 define family as a relationship and an emotional system whereby family members influence, and are influenced by one another at individual and dyadic levels. Family functioning is significantly compromised in turn by the family member's drug abuse with a serious impact on the whole family (Rowe, 2012:59).

According to Sharma et al (2019:132), substance abuse causes significant harm to the family and society. From the earliest development of family therapy, the family systems theory was a prominent systematic perspective guiding research and practice in the field; it evolved in its premises, concepts and clinical applications over the past three decades by the Bowen Family Systems Theory (BFST) (Erdem & Safi, 2018:2). This theory focuses on the family purpose in the individual's behaviours and decision-making (Bass, 2015:2). The families influence the initiation of drug abuse as family relationships are the creation and maintenance of drug-related problems. A strong connection between disrupted family relationships and drug addiction was identified (Schafer, 2011).

2.1.8 Family disease model

The family disease model is an alcoholism and addiction model within families and its impact thereon. Family members are observed as the main participants in the lives of substance addicts (Schafer, 2011:1). According to Regmi and Lama (2018:65), the family disease model considers that families with substance abuse members have various forms of addictive behaviours. It left limitations in explaining the influences of social and peer authorities, unable to explain why several individuals within those families are not developing dependence and contrarywise.

Lander, Howsare and Byrne (2013:194) contend when one family member indicates behaviour change, it influences the whole family. Substance abuse harms the individual and families, whilst instigating a burden for society. The dependency contributes negatively to housing instability and family structures (Daley, 2013:73).

2.2 Conclusion

This chapter provides an overview of the theories employed to interpret substance abuse by children, focusing on their basic assumptions and main features. A brief discussion of each theory employed to understand illegal substance abuse is also presented.

CHAPTER 3: APPLICATION OF THE QUALITATIVE RESEARCH PROCESS

3.1 Introduction

This chapter orientates the reader to the chosen research paradigm, demonstrating that the entire study has coherence across the research purpose (Koch et al 2014:133; Singh, 2015:133). This chapter provides a detailed description and justification of the research methodology adopted to guide the study. Literature was employed to provide a reliable basis for the qualitative research methodology (Marshall & Rossman, 2016:7). The justification of the methodology flows from the research question, linking with the research goal, including the research and task objectives.

3.2 Research methodology

Research methodology refers to the strategies, blueprint, set of decisions, and procedures guiding researchers' choices in conducting studies (Carter & Little, 2007: 1317). Research methodology justifies the methods of a research project and guides the research process to ensure appropriate ways and indicates are followed. In this section, the research reviews the chosen research approach and research design.

3.3 Research approach

The research approach entails the design and procedures followed to explain the data collection, analysis and interpretation in a detailed manner (Creswell, 2014:13). Gravetter and Forzano (2009:148) define a research approach as a general approach and goals of a study, influenced by the kind of question the study aims to answer. The study adopted a qualitative research approach to assist in obtaining information from fathers, parenting children, abusing illegal substances. The main aim of a qualitative research approach is to observe individuals in their natural settings, in preference to manipulating the setting to produce the result (Hayhow & Steward, 2006:476). This research approach focuses on the

human consciousness and language, the interaction between individuals in social settings to in the artificial settings of experiments and surveys (Robson, 2011:17).

Three recognised approaches for conducting research are identified, indicating qualitative, quantitative, and mixed methods. Babbie and Mouton (2012:270) assert a qualitative research approach focuses and attempts to study human action and behaviours. Its main primary goal is to describe and understand human behaviour. According to Babbie and Mouton (2012:270), a qualitative research approach differs from the quantitative research approach concerning the following main features:

- research is conducted in the natural setting of social actors
- a focus on process is preferred to outcome
- the primary aim is in-depth descriptions and understanding of actions and events
- the main concern is to understand social action concerning its specific context in preference to attempting to generalise to some theoretical population
- the qualitative researcher is the 'main instrument' in the research process.

Conversely, a quantitative research approach relies on numbers to assess the relationship amongst the variables, more concerned with the deductive testing of hypotheses and theories (Punch, 2007:235; Maree et al 2010:257). Punch (2007:237) contends the following as its main characteristics:

Quantitative research approach rests on measurement, and therefore restructure data, and usually research questions, conceptual frameworks and design a well. Samples are typically larger than in qualitative studies, and generalization through sampling is usually important.

The mixed methods approach considers quantitative and qualitative approaches indicate the following:

In mixed methods research, the researcher constructs knowledge about real-world issues based on pragmatism, which places more emphasis on finding the answers to research questions than on the methods used (Maree et al 2010:262).

The study adopted a qualitative research approach in obtaining information from fathers, parenting children, abusing illegal substances. A qualitative research approach is ideal when pursuing to understand human experiences from the perspective of those involved (Babbie & Mouton, 2012:270). It focuses on exploring the "why?" questions to develop a broader understanding of what is studied. This assertion is further shared by authors

positing that qualitative research focuses on personal experiences; its goal is to understand the processes, experiences and meanings humans have provided to objects or attached to their environment (Welman, Kruger & Mitchell, 2012:69). The qualitative research approach follows an inductive process, indicating data are collected rather than working on assumptions on a matter. In qualitative research, researchers employ the methods of observation, content analysis, and in-depth interviews to obtain detailed information on individuals' experiences regarding a research topic (Kalof, Dan & Dietz, 2008:79). Creswell (2009:175) recommended the following characteristics of the qualitative approach, capturing the traditional perspective and the novel advocacy, participants and self-reflective perspective of qualitative inquiry:

- The researcher is a crucial instrument in qualitative research. The researcher is not neutral but actively involved throughout the research process.
- Qualitative researchers use various sources of information in preference to on a single source.
- When analysing data, qualitative researchers engage in a continuous back and forth process to ensure that the themes emerging are a true reflection of the participants' storylines.
- Qualitative research is more concerned with the meaning the participants attach to the phenomena under study.
- The qualitative research process is not fixed. An emerging design is employed to accommodate the ever-changing world of the participants.
- Qualitative research attempts to gain an inclusive picture of the phenomena under study.

A qualitative research approach was deemed appropriate for this study because of its typical features, as presented by Babbie and Mouton (2012:270):

- Situations are described from the perspective of those involved – the researcher made conclusions about the research findings based on the participants' frames of reference. Findings of the study would be explained according to the fathers' own experiences of parenting children, abusing illegal substances.

- The generalisability of findings is not a major concern – in the study, each participant (father) was allowed to explain and explore their own experiences of parenting children, abusing illegal substances. In that manner, no generalisation was applied in the study.
- It occurs in the natural settings of the social actors – all interviews in the study were conducted in the Kagiso, where all the participants (fathers) reside.
- The social world is viewed as a creation of the people involved – the research findings were understood and seen by the researcher in the way participants observe them. The study was guided by the interviews and experiences of the fathers on how they are coping with parenting children, abusing illegal substances.
- The main aim of qualitative research is in-depth descriptions and an understanding of actions and events. The current study focused on a full comprehension of the experiences of each father and their reactions towards the topic during interviews.

3.4 Research design

A research design is a plan for how the researcher intends to conduct the research and analyse the data (Babbie & Mouton, 2012:74; Bryman, 2012:46). Thomas (2016:26) contends that research design is the same as designing anything else, whereby the researcher commences with the purpose, followed by implementation and completion. Other authors contend that the research designs are plans, guiding the collection and analysis in a manner consistent with the purpose of the study (Terre Blanche, Durrheim & Painter, 2006:34).

Maree et al (2010:70) comprehensively define research design as follows:

A plan or strategy which moves from the underlying philosophical assumptions to specifying the selection of participants, data gathering techniques to be used and the data analysis to be done. Therefore, the choice of research design is based on the research practices and influences the way in which she or he collects data.

Research design “provides a framework for the collection and analysis of data. Its choice reflects decisions about the priority being given to a range of dimensions of the research process” (Bryman, 2012:46). According to Terre Blanche et al (2006:57), in developing a research design, the purpose of the research, the theoretical framework informing the research, the context where the research is conducted, and the research techniques applied to collect and analyse data should be indicated. Babbie and Mouton (2012:279) also indicate that the following features are important for qualitative research design:

- a detailed engagement/encounter with the object of study
- a small number of cases to be studied
- an openness to multiple sources of data (multi-method approach)
- flexible design features allowing the researcher to adapt and revise the study where and when necessary

This study employed the following four interlinked research designs:

- detail engagement/encounter with the object of study
- a small number of cases to be studied
- an openness to multiple sources of data (multi-method approach)
- flexible design features allowing the study to adapt and implement revisions where necessary

3.4.1 Exploratory research design

This research design technique is adopted when the intention is to explore the research topic. It is often employed during in-depth interviews to satisfy topic curiosity (Babbie & Mouton, 2012:79). It is employed to render preliminary investigations into unknown research areas. The exploratory research design engages in an open, flexible and inductive approach to research, attempting to establish novel insights into phenomena, providing detailed information regarding methods for data collection, whilst establishing data sources (Terre Blanche et al 2006:44). According to Babbie and Mouton (2012:80), exploratory research design should be included in the study for the following reasons:

- to satisfy a desire for a better understanding
- to develop the methods to be employed in any subsequent study
- to explicate the central concepts and constructs of a study
- to determine priorities for future research
- to initiate innovative hypotheses about an existing phenomenon

This study employed an exploratory research design. Limited knowledge and understanding exist concerning the experiences and challenges of fathers, parenting children, abusing illegal substances (Klein et al 2009:300; Zanoni et al 2014:84).

3.4.2 Descriptive research design

With a descriptive research design technique, the observed is described (Babbie & Mouton, 2012:80). Authors posit that “descriptive research aims to describe phenomena accurately, either through narrative-type descriptions, classification or measuring relationships” (Terre Blanche et al 2006:44). This research design was appropriate because the attempt was to describe what was explored during the participant interviews.

3.4.3 The contextual research design

Contextual research design technique pursues insights into the phenomena within the natural environment of the participants to gain a broader understanding (Noor, 2008:160). the contextual design aims to describe and understand events in their natural settings where they occur. It is contended that “if one understands events against the background of the whole context and how such a context confers meaning to the events concerned, that one can truly claim to ‘understand’ the events” (Babbie & Mouton, 2012:272). Contextual also relates to developing an in-depth understanding of parenting children, abusing illegal substances within the fathers’ experiences, challenges and coping strategies.

The study ensured engagement with the participants where they reside in the area of Kagiso, to develop a better understanding and to grasp in-depth and first-hand information on their experiences and challenges of parenting children, abusing illegal substances.

3.4.4 Phenomenological research design

This research design technique refers to experiencing a phenomenon. As a qualitative research design, its main focus and goal concerns the experiences, behaviours, emotions, and narrative (Waters, 2017:1). The phenomenological research design is premised on the assumption that meaning and truth can be concluded from individuals’ experiences (Wojnor & Swanson, 2007:173; Fotchman, 2008:186; Moule & Goodman, 2014:176). Phenomenological research, according to Holland and Rees (2010:75).

...is concerned with how an individual view the world and how she or he lives from inside. Whilst many approaches to research look for commonalities of human experiences. Phenomenological research considers what it may be like to this person, living this life at this time.

For this study, this research design was employed to understand the experiences and challenges encountered by fathers, parenting children, abusing illegal substances. This included unravelling their emotions and how they are coping with parenting such children.

3.5 Research methods

The qualitative research methods are defined as the methods that cannot specify how the target population feel or think; it can indicate how people feel and think (Merriam, 2009:253). Dudwick, Kuehnast, Jones and Woolcock (2006) contend that qualitative methods are associated with the evaluation of social dimension. This study considered the following related research methods.

3.5.1 Population, sampling and sampling techniques

Population indicates a “theoretically specified aggregation of study elements” (Babbie & Mouton, 2012:173). Gilbert (2008:167) defines a population as the total number of individuals in the real world where the researcher is interested. A population comprises all the participants with the experience that interests the researcher. This study comprised the biological fathers (married and single) in Kagiso, Krugersdorp area, and in Gauteng, parenting children, abusing illegal substances. The choice was to conduct the study in Kagiso for practical reasons because of employment in the area.

Attributable to time and financial constraints, the entire male population of Kagiso could not be included, therefore a small sample was extracted. Bryman (2012:187) describes a sample as the subset or portion of a population selected for the study. A sample is a representation of the study population (Maree et al 2010:178). In a qualitative study, the sample does not necessitate a representative of the study population; it is not the intention to produce generalised results for the whole population (Ghani & Hashim, 2013:762). The sample should comprise those individual characteristics of the whole population (Picardi & Masick, 2014:154). Polkinghorne (2009:139) states that sampling conveys the intention that the selection represents the larger population, concluded from a portion, providing relevant descriptions of the study area.

Two types of sampling methods can be employed to induce the sample from the population, indicating probability and non-probability sampling methods. The former is the method of selecting familiar individuals to participate in the study. In probability sampling, the entire

population is known (Gravetter & Forzano, 2009:134). Babbie and Mouton (2012:212) define the probability sampling method as a technique, providing a method for selecting two similar groups of individuals in a study.

In this study, the probability sampling could indicate using fathers with similar experience of parenting illegal substance abuse children to establish how they cope with the resultant changes in their lives. In the current study, non-probability sampling was applied. Non-probability sampling refers to the methods employed in research where a small portion in the population is assessed (Bryman, 2012:187; Beins, 2013:124). Babbie (2007:274) describes non-probability sampling as “any technique in which a sample is selected in some way not suggested by probability theory”. This type of sampling method refers to sampling plans where it is impossible to include all individuals in the study sample (Robson, 2011:274). In this case, the fathers, parenting children, abusing illegal substances, were interviewed.

This study applied two non-probability sampling methods, indicating purposive and snowball sampling methods, specifying non-probability sampling methods. Purposive sampling entails selecting a sample concerning knowledge and understanding of the population, its characteristics, and the nature of the research goals (Babbie & Mouton, 2012:166). For this study, fathers living in Ward 9 in Kagiso, parenting children, using illegal substances, were selected. A communication (letter) was drafted, requesting permission to conduct the study within the authority of Ward 9 (Addendum D); permission was duly granted. Professionals and non-governmental organisations were approached, rendering services to the youth, abusing illegal substances.

According to David and Sutton (2011:232), purposive sampling is applied when the researcher is acquainted with the participants in the study. “It is used in special situations where the sampling is done with a specific purpose in mind” (Maree et al 2010:178). It also depends on the discretion of the researcher to select and identify relevant or suitable participants with similar characteristics for the study (Beins, 2013:129). This study formulated the requirements for the participants; if they met those requirements they were considered for inclusion in the study. The selected participants had to meet the following criteria:

Biological fathers were chosen – both married and single – from Kagiso, comfortable in sharing their experiences, challenges and coping strategies of parenting children, abusing illegal substances.

- participants should be able to express themselves in either English, Tswana, Sotho or isiZulu, as the researcher relied mostly on verbal data to obtain a sense of the participants' experiences
- participants should have resided with their biological children illegal substance abuse for at least one year, before the interview

Where applicable, the snowball technique was employed to conclude the sample from the population. In applying snowball sampling, "the researcher identified a few individuals who meet the criteria and who then act as informants to identify other members from the same population for inclusion in the sample" (Kalof et al 2008:45). Snowball sampling is ideal where the population is difficult to locate (Maree et al 2010:177; Babbie & Mouton, 2012:167). Deciding the sample size is not always clear, as it relies on various considerations, such as time and costs (Bryman, 2012:197). According to Gravetter and Forzano (2009:131), the numerous factors below determine the sample size:

- the goal of the sample size is to obtain a sample representative of the population
- although large samples are suitable, there is a practical limit to the number of individuals reasonable for a study
- in a qualitative study, no simple solution exists to determine the total individuals for a sample
- the first premise, observing a large sample was probably more beneficial for the study
- when determining the size of the sample, the size of the population should be considered, indicating, the smaller the total population, the proportionately larger the sample should be to ensure satisfactory results (Welman et al 2012:71)

In qualitative research, adequacy is determined when data saturation was reached. Saturation refers to the achievement of depth and breadth of information (Gilbert, 2008:180). In this study, data saturation was achieved; from the outset, the sample size was predetermined from the onset.

3.6 Data collection

Data collection methods refer to various methods developed to collect evidence in a structured and organised manner (Bless, Higson-Smith & Kagee, 2007:54). Several research methods are available to collect usable data from the participants. This section provides an outline of preparation with participants for data collection, including the methods utilised for data collection.

3.5.2 Preparation for data collection and data collection methods

Data collection is defined as the main feature of any study. Data constitute the foundation material researchers employ (Terre Blanche et al 2006:51). Creswell (2009:178) asserts that the data collection steps include the boundaries for the study, collecting information through structured and unstructured interviews, documents and visual material, and establishing the protocol for recording the information.

This study employed semi-structured interviews with the assistance of an interview guide, facilitated through open-ended questions for data collection. The researcher employed semi-structured interviews with open-ended questions, focusing on diverse parts of the research (Donalek, 2005:124). According to Ryan, Coughlan and Cronin (2009:310), a semi-structured interview is a more flexible approach to interviewing. Whilst an interview schedule can be employed for predetermined topics, allow for unanticipated responses and concerns to emerge through open-ended questioning. The wording of questions is flexible and facilitates diverse levels of language and clarifications by the interviewer.

The term 'interview guide' refers to the brief list of prompts of areas to be explored during unstructured interviews, often employed in unstructured interviewing or to the more structured list of concerns to be addressed or questions to be directed in semi-structured interviewing (Bryman, 2012:473). The interview guide is the schedule determined by the structure of the interview, the nature of the research, and the purpose of the study. The interview guide comprises a summary of categories relating to the research, on which interview questions are formulated (Ryan et al 2009:311).

The study employed the interview guide, exploring the main study topics. Open-ended questions are the questions participants should answer by providing a detailed response (Picardi & Masick, 2014:150). The advantage of employing open-ended questions is they

assist in obtaining more informative responses than would have been obtained through close-ended questions. Open-ended questions are useful in obtaining a broad understanding of the phenomenon. They encourage participants to share sensitive information Petruzzi, Pullen, Lange, Parnarouskis, Dominguez, Harris, Quiterio, Lekpeh, Manobah, Henderson, & Borba, 2018:1828).

During the data collection period, it should be considered that conducive environments need to be created during interviews. Participants should be aware that they participate in a study and should be reminded of the study purpose, not to feel deceived (Creswell, 2014:98).

The following items were included in the interview guide to compile the biographical profile of the participants:

- age
- marital status and the number of children
- age of the children
- drugs used by the children
- gender of the children

To elicit information on the participants' experience of parenting children, abusing illegal substances, the following questions/statements were included:

- Tell me about your child that uses illegal substances prompts (gender, age, the illegal chemical that the child is using).
- How did you establish that your child is abusing an illegal substance?
- What emotions did you experience initially when you found out that your child is using illegal substances?
- Describe your relationship with your child before finding out about his/her illegal substance abuse?
- Describe the emotions that you are currently experiencing concerning your child's illegal substance abuse.
- How is the relationship with your child since you found out about his/her illegal substance use?

- From your perspective, what are the challenges you experience as a father raising children, abusing illegal substances?
- How is the child's mother involved in addressing the child's illegal substance abuse?
- Share with me how you cope with the challenges you experience concerning your child's illegal substance abuse.
- What have you done regarding obtaining professional assistance for your child with his/her illegal substance use?
- How would you like the social worker to assist with addressing your child's illegal substance use?

Where applicable, the following interview skills were applied:

- **Probing-** This technique is employed in interviews to elicit a more complete answer to a question. It is a nondirective question that encourages the participants to elaborate more on a provided answer (Babbie, 2010:277). Probing is an interview skill researcher use in situations where participants did not elaborate on their response, therefore, the need to pursue more information (Bryman, 2012:223). In this study probed more for clarity and a better understanding of what the participants shared, clarifying answers provided by the participants.
- **Listening-** Listening refers to a thoughtful, selective process where the researcher selects the speaker's tone and pays attention to, recognises, understands, and understand them (Grobler & Schenck, 2010:49). Listening skills were applied by listening more and talking less. Milne (2007:40) contends that listening skills form the basis of other skills. Failure to listen attentively could prevent following the substance of an interview and limit the ability to direct relevant questions that would benefit the study.
- **Paraphrasing-** This indicates reflecting the emotions and words to the participants. Usually, the words or content are repeated to let the participant know that the study follows what was disclosed, ensuring sensitivity to their personal experiences and understanding their emotions and the meaning behind their words (Milne, 2007:40). In this study, participants' words were repeated though not word for word. It was a repetition of what the participants revealed to let participants know that attention was provided to understand the exact meaning of their words and their emotions.
- **Summarising-** It indicates compiling ample information when a client conversed information for a length of time; it is similar to paraphrasing. It is a way of retaining

contact with the participant, indicating monitoring what is said and an understanding of the participant's underlying emotions. This interview skill combines various themes of what was expressed by the participant, providing an overview enabling the participant to render connections (Milne, 2007:43). The participants were provided with sufficient opportunities to express themselves at length and to communicate an understanding after listening to what the participants pronounced.

In preparation for data collection, Rule and John (2012:64) considered the following guidelines:

- The researcher established a conducive atmosphere for the interview. In this regard, the researcher created a conducive environment whereby participants could share their experiences without any fear. Participants were not judged, irrespective of what they share during the interviews.
- The researcher explained the purpose of the study in detail to the participants before they participate in the interview. Beins (2013:45) asserts that briefing is about the researcher informing participants about the purpose of the study. Ryan et al (2009:312) contend that potential participants should be provided full explanations as to the nature of the research and the format the interview will take.
- The researcher allowed the participants to pursue clarity about the study and make sure they were willing to proceed before the researcher began the interview. The researcher did not continue with the interview unless informed and voluntary consent was obtained from each participant. The participants were provided with an opportunity either to participate in the study or not, without any coercion. Bordens and Abbott (2014:194) concede that informed consent involves assuring participants they have the right to refuse or terminate their participation without any repercussion. Ryan et al (2009:312) contend that "it is necessary to obtain written consent before the interview and interviewees should be provided time to reflect on whether they wish to partake".
- The researcher informed participants of ethical obligations. The researcher used codes when referring to participants, in preference to their original names, to protect their identities. Thomas (2016:82) defines anonymity as a way of maintaining confidentiality and protecting the identities of the research participants. The information provided by the participants were not shared or divulged with others (Goredem-Braid, 2010:51).

- The researcher adopted a conversational in preference to confrontational style to build a relationship with each participant. For instance, the researcher started with directing questions, the least challenging or provocative. Researcher allowed participants to actively engage during the interviews. The researcher also started with simple and uncomplicated questions, such as names, age or marital status, so the participants were relaxed at the start of each interview.
- The researcher listened carefully and avoided interrupting the participants. The researcher utilised social skills during the interviews, for example listening, by listening attentively when participants shared their experiences and challenges without interrupting them so they did not feel used by the researcher.
- The researcher was considerate and sensitive to the emotional context of the interview. The researcher ensured that all participants were provided attention and counselling where there is a need, in particular where the interviews triggered their emotions. Babbie and Mouton (2012:256) contend that the researcher must assist participants to cope with any negative emotions experienced during interviews, particularly if they were exposed to difficult situations.

3.7 Pilot testing

A pilot test is a small test employed by researchers to determine if the proposed study will be attainable, reliable or validated. It is a small test to assist the researcher in designing a study for further confirmation (Arain, Campbell, Cooper & Lancaster, 2010:10). Welman et al (2012: 148) regard the pilot testing as “the dress rehearsal for the actual research project”. A pilot testing is usually undertaken with a small set of participants comparable to members of the population from which the sample for the full study was extracted (Bryman, 2012:264).

The purpose of the pilot test is to assess achievability before the actual study could commence to avoid catastrophic consequences on a large study (Thabane, Ma, Chu, Cheng, Ismaila, Rios, Robson, Thabane, Giangregorio & Goldsmith, 2010:1). Welman et al (2012:148) summarise the purpose of a pilot test as follows:

- to detect possible flaws in the measurement procedures
- to identify unclear or ambiguously formulated items
- an opportunity for researchers and assistants to notice non-verbal behaviour

3.7.1 The process of the pilot test

The pilot test was undertaken by assessing the participant to examine if they meet the criteria; for instance, participants sharing similar interests were willing to and volunteered to partake in the study. According to Kirkby, Calvert, Draper, Keeley and Wilson (2011:1), participants include those participating in a pilot test, with the right to choose whether they want to participate in the test. A pilot test was conducted with two participants matching the stipulated criteria. The participants in the pilot test did not form part of the sample to participate in the main study.

In the study, participants interested in taking part in the test were recruited. The purpose of the test was explained, including the procedures to be followed during interviews, indicating employing a tape recorder to voice-record all interviews; they were ensured of confidentiality concerning shared information. Two amongst the participants were selected, identified in Kagiso (where the research was conducted) to participate in the pilot test. They were approached and explained they would not be part of the actual participants but would participate in the pilot tests. A meeting was arranged with each of them at Kagiso multi-purpose centre to explain their purpose in the study and to confirm their willingness to participate in the pilot testing. The two participants agreed to participate in the pilot testing and undertook to be available on the day of the interview. As part of the ongoing process for the study, participants were provided with sufficient information for a voluntary and informed decision.

3.7.2 Outcome of the pilot test

The interview guide questions were modified, based on the feedback received from the participants (Janghorban, Latifnejad & Taghipour, 2014:3). Several authors assert that the application of a pilot test is to assess the interview protocol; it is a pre-test for a study instrument, such as an interview guide. Majid, Othman, Mohamad, Lim and Yusof (2017:1073) indicate that pilot test assist to identify flaws or limitations in the interview design allowing necessary modifications to the primary study. Participants were requested to share their views regarding the interview guide. Subsequently, the following changes were influenced:

- the first question was reorganised, as it was not allowing participants an opportunity to respond at length
- secondly, question Number 4 was swapped with question Number 5, based on the responses and feedback from the participants; a need was observed to swap the questions.

The initial interview guide was drafted as follows:

Biographical questions:

- How old are you?
- What is your marital status?
- What is your employment status?

Topic related questions:

- What can you tell me about your child who uses illegal substances? Prompts: gender, age, the illegal substances that the child is using?
- What emotions did you experience initially when you found out that your child is using illegal substances?
- From your perspective, what are the challenges you experience as a father, parenting children, abusing illegal substances?

The final version of the interview guide was formulated as follows:

Section A: Biographical requests

- age
- marital status and the number of children
- age of children
- drugs used by the children
- occupation
- language
- gender of the children

Section B: Topic related questions/statements

- How did you realise that your child is using illegal substances?
- Describe the emotions that your child is using illegal substances?
- Describe your relationship with your child before finding out about his illegal substance abuse
- How is the relationship with your child since you found out about his illegal substances use?
- How is the child's mother involvement in addressing the child's illegal substance abuse?
- Share with me how you cope with the challenges you experience concerning your child's illegal substance use (Prompts: form of support)
- What have you done regarding obtaining professional assistance for your child with his illegal substances use?
- How would you like the social worker to assist with addressing your child's illegal substance use?

3.8 Method of data analysis

Data is defined as “raw” information not subjected to interpretation, in its original form (Rasanen & Nyce, 2013:656). In qualitative research, data analysis is a stage incorporating several elements. The data have to be assessed to establish obvious limitations (Bryman, 2012:13). Data analysis is a process of understanding and making sense of the information collected, enabling it to be communicated and shared with others (Creswell, 2009:183).

For this study, the data were analysed following the eight steps of Tesch (in Creswell, 2009:186):

- The audio-recorded interviews were transcribed, word for word. Once this was completed, the transcription was carefully and thoroughly perused to acquire a sense of the whole. Ideas were noted.
- One document was selected, the most interesting/the shortest/the one on top of the pile. The file was perusing considering the following: What is this about? The “substance” or content of the information was not observed but rather the underlying meaning. The researcher wrote down her thoughts in the margin.

- Upon completion of this task for several participants, a list of topics was constructed, similar topics were grouped; these topics were listed in columns headed “major topics”, “unique topics”, and “leftovers”.
- A fitting abbreviation for each of the identified topics was established.
- A descriptive work for each topic was established and turned into themes or categories.
- A final decision was made on abbreviating each theme or category and codes were alphabetised.
- Using the cut-and-paste method, data were assembled; material belonging to each theme or category was kept separate. A preliminary analyst was contacted concerning the data analysis.
- Existing data were recorded where needed. Conclusion of research finding was constructed.

3.9 Data verifications methods

Data verification is described as an activity where the researcher determines whether the conclusions are true or accurate; the research is subjected to rigorous verification measures to ensure the findings are valid (Bulpit & Martin, 2010:7). In qualitative research, data verification is important because it assists in verifying data or work, as the data might be intentionally or unintentionally biased (Kalof et al 2008:159).

In qualitative research, reliability and validity measure rigour. Reliability refers to the extent to which the analysed data can be repeated in various studies (Koro-Ljungberg, 2008:983). Validity determines the accuracy of the findings from the study perspective, participants and readers (Creswell, 2009:191).

According to Koro-Ljungberg (2008:986), it is not the qualitative research’s intention to produce results generalised to the whole population. The research findings must be trustworthy and of extreme quality (Koro-Ljungberg, 2008:986). It is imperative to know that whilst the quality of the findings is assessed for the accuracy, qualitative research is not based on the search for an objective truth, but acknowledges various truths or multiple realities (Harper & Kuh, 2007:7). In this study, quality of the findings is not based on arriving at the same reality or truth but reveals the multiple realities expressed by the participants,

demonstrating credibility, transferability, dependability and confirmability (Lincoln & Guba, as cited by Krefting, 1991:215).

3.9.1 Credibility

Credibility refers to the element permitting recognition of the experiences contained within the study through the interpretation of participants' experiences. "A qualitative study is considered credible when it presents an accurate description or interpretation of human experience that people who also share the same experience would immediately recognise" (Thomas & Magilvity, 2011:152).

To ensure credibility, triangulation was applied. In a qualitative study, triangulation refers to information collection on various perspectives. In this case, various questions were directed various, diverse sources sought, and various methods employed (Babbie & Mouton, 2012:277). Sources, such as books, journals and individuals, to collect data and information were employed to complete the study.

Member checking is one of the most important techniques, ensuring credibility (Shenton, 2003:68). Member checking allows sufficient descriptions of the human experiences as perceived by the participants. Where applicable and necessary, analysed data were returned to the participants to allow them to comment on the findings, whilst assessing the accuracy of the emerging interpretations and conclusions.

3.9.2 Transferability

Transferability is the ability to transfer research findings or methods from one group to another, or "how one determines the extent to which the findings of a particular inquiry have applicability in other contexts or with other subjects or participants" (Thomas & Magilvity, 2011:153). In this study, the element of transferability was discussed, as the aim of the study was to represent the reality of the study participants' experiences.

3.9.3 Dependability

In qualitative terms, dependability relates to reliability, occurring when the methods of data collection, analysis and interpretation are clearly described allowing additional studies to follow the decision trail employed (Thomas & Magilvity, 2011:153). In this study, the

research findings were compared with those of other researchers. In this regard, it could be established if the study was in line with alternative academic research.

Dependability also refers to data consistency, assessing “whether the findings would be consistent if they were replicated with the same subjects or in a similar context”. The strategy of dependability establishes consistency (Guba cited in Krefting, 1991:216). An independent coder was employed to code the data. Subsequently, and on completion of this process, the researcher, the independent coder and supervisor engaged in a discussion to finalise the list of themes and sub-themes for data analysis.

3.9.4 Confirmability

Confirmability in qualitative terms occurs when credibility, transferability and dependability are established. Conversely, flexibility (a similar construct to validity in qualitative research) obliges self-reflecting the attitudes that might have influenced the research. In this case, participants guided the study. Clarity was sought on concepts, definitions, slang words, and metaphors (Thomas & Magilivty, 2011:154). A journal was kept to document ideas during data collection and analysis, which may have tampered with the findings and recommendations from other researchers or individuals expert in this field were requested. In the study, other researchers were consulted to peruse and assess her work so they could be able to make comments and suggestion about the study.

3.9.5 Triangulation

Triangulation in a qualitative study refers to collection information on various events and relationships amongst diverse perspectives. In this case, various questions were directed, pursuing several sources, whilst employing distinct methods (Babbie & Mouton, 2012:277).

3.10 Conclusion

This chapter presents the research methodology followed to answer the research question of the study. It also indicates how the methodology was applied to achieve the study. A detailed narration was also provided concerning applying the qualitative research approach, research design, population and sampling, data collection, data analysis, and ways where rigour was achieved.

CHAPTER 4: PRESENTATION OF THE RESEARCH FINDINGS

4.1 Introduction

This chapter presents an assessment of the research findings, focusing on comparing and contrasting the narratives of the 12 participants with supporting literature. Data were analysed following Tesch's eight steps (Creswell, 2009:186). During data analysis, the services of an independent coder were employed to provide credence to the findings. Consultation with the independent coder and the supervisors led to an agreement on the seven themes and sub-themes emerging from the data.

4.2 Biographical profile of the participants

Table 4.1: Demographic information of the participants

P	Age	Marital status, no. of children	Age of the children,	Drugs being used by the children	Occupation	Language	Gender of the children
A	56	Married, 3 kids	18	Nyaope	Unemployed	Setswana	Boy
B	52	Married, 2 kids	27	Nyaope	Unemployed	Setswana, Isizulu	Girl
C	68	Married, 2 kids	18	Nyaope	Pensioner	Setswana, Sesotho	Boy
D	54	Married, 2 kids	26	Nyaope	Unemployed	Isixhosa	Boy
E	62	Married, 3 kids	26	Dagga	Pensioner	Isizulu	Boy
F	68	Married, 3 kids	18	Nyaope	Pensioner	Sesotho	Boy
G	52	Married, 3 kids	21	Nyaope	Unemployed	Sesotho	Boy
H	57	Married, 3 kids	27	Nyaope	Employed	Setswana, Sepedi	Boy
I	63	Married, 3 kids	25	Glue	Pensioner	Setswana, Sepedi, Isixhosa	Girl
J	47	Married, 1 child	22	Crystal Meth/Tik	Employed	Setswana, Sepedi	Boy
K	57	Widow, four kids	28 & 30	Nyaope, alcohol	Employed	Setswana, Sepedi, Isixhosa	Girl, Boy

The biographical profile is included because it is important to comprehend the personal characteristics of the participants and their children who abuse illegal substances. According to Le, Sakaluk, Day and Impett (2018:2), parents' characteristics are liable to shape their parenting. Table 4.1 above captures the participants' demographic

characteristics necessary for this study, indicating, age, marital status, number of children, drugs abused by their children, occupation, and language. The gender and ages of the children are included.

4.2.1 Participants' age

The participants' ages were included because some authors contend that the age of the parent is liable to influence the parenting (Le et al 2018:3). For instance, it was contended that the older the parent, the more prone they will be more supportive. The biographical profile reflects that, though one participant was above 50.

4.2.2 Participants' marital status

Table 4.1 reveals all participants, apart from one, who lost his partner, were married during the study period. According to Le et al (2018:2), parenting is essentially influenced by societal norms, shaping how parents raise their children. For instance, traditionally mothers are expected to assume the function of primary caregiver, as opposed to the father. Conversely, fathers are often socialised to exercise their masculinity, which may limit their engagement with their children (Rushing & Powell, 2015:410). Rehel (2014:112) contends that males are equally capable of active involvement in child-rearing, to being mothers' helpers. Similarly, Don, Biehle, and Mickelson (2013:1125) contend that fathers are sensitive to a healthy co-parenting relationship.

4.2.3 Age of substance-abusing children

Contrary to the widely-held assertion by proponents of life theory that the adolescent stage is the strong predictor of substance abuse (Choate, 2015:462; Granger, Cook, & Ramos, 2019:2), most participants' children reported to abuse substances are in an emerging adulthood stage. This stage is a developmental phase of the late teens and twenties (McKinney, Morse & Pastuszak, 2016:1207). This period is often characterised by instability, uncertainty, and exploration in various aspects of life, such as identity and education (Padilla-Walker, Son, & Nelson, 2019:1). A possible reason for substance abuse, amongst the individuals in emerging adulthood, is they are enjoying the freedom of the adult world, often denied to adolescents (Bratt, 2008:386). Percy (2008:452) postulates that substance abuse becomes increasingly appealing to young adults experiencing decreasing

parental control. Granger et al (2019:4) concede that individuals' social structure and culture also influence life-course patterns.

4.2.4 Drugs abuse by the children

Eight of the participants' children were reported to be using a drug known as *nyaope*. According to the Department of Social Development (National Drug Master Plan 2006-2011), *nyaope* is a mixture of Marijuana and heroin used increasingly in predominantly black townships. Although the full composition of *nyaope* is undetermined, unconfirmed reports indicate that a mixture of rat poison and anti-retroviral drugs (ARVs) are included in the mixture. In all confirmed reports, heroin and Marijuana were the main ingredients (Mokwena, 2016:138). *Nyaope* users are generally identified by their poor personal hygiene. They often resort to stealing and selling stolen goods to sustain their habit (Figure 4.1).



Figure 4.1: Common appearances of nyaope users

4.2.5 Participants' occupation

Various authors contend that parenting can be influenced by the external factors, such as socio-economic conditions (Le et al 2018:40), therefore the need to include the participants' occupation. Four of the participants were unemployed; three were employed, whereas the remaining four participants were pensioners. Parenting entails financial costs, which may lead to stress if the parents cannot meet the demands (Nelson & Uecker, 2018:1771). Kaiser, Li and Pollmann-Schult (2018:2) contend that children's behaviour can be linked to parents' socio-economic circumstances. Cottee and Roman (2014:27) contend that parents in underprivileged socio-economic circumstances are liable to have a constrained relationship with their children. Such parents often have limited time with their children. Wealthy parents, conversely, can afford to send their children to the best schools and live in secure neighbourhoods (Strohschein & Gauthier, 2018:233). Conversely, Augustine (2014:238) contends that employed parents can also have limited time to engage in positive parenting, such as involvement in the children's schoolwork.

4.2.6 Gender of the children

Nine of the participants' children were males and four presented females. This gender disparity is consistent with the widely-held assertion that substance abuse is more prevalent amongst boys than girls (Bahr & Hoffman, 2008:746; Kalyva & Melonashi, 2014:657; Anderberg & Dahlberg, 2018:25). One conceivable explanation may relate to the way boys and girls socialise. According to O'Donnell, Richards, Pearce and Romero (2012:434), boys are delinquent because they spend more unsupervised time with their friends than girls do. Conversely, Bahr and Hoffman (2008:746) believe that girls are inclined to be more religious than boys, therefore, they are less prone to use drugs. Males are also believed to enjoy more freedom, have more pocket money and freedom because society forgives males if they transgressed (Alhyas, Al Ozaibi, Elarabi, El-Kashef, Wanigaratne, Almarzouqi, Alhosani & Ghaferi, 2015:4).

4.3 Report on themes emerging from coding interview transcripts

This section presents themes and sub-themes (Table 4.2) emerging from data coding.

Themes		Sub-themes
a) Participants' experiences of telltale signs of children's addiction	1.1. Stealing from home and selling items for drugs/Items missing from the house	
	1.2 Stealing from the community members	
	1.3 Signs or symptoms of substance abuse amongst participants' children	
	1.4 Personal observations and reports from others about the child smoking substances that influence their behaviours	
b) Participants emotions about learning of their children's drug addiction		
c) Effect of the child's illegal substance abuse on family relationships		
d) Effect of addictive behaviour on the relationship between participant and child		
e) Mothers' involvement in addressing the child's illegal substance abuse	5.1 Emotional support, spirituality and discipline	
	5.2 Participants' views regarding their partners' attitude towards the children who use drugs	
f) Participants' coping strategies	6.1 Participant's struggle to cope with the children's addictive behaviour	
	6.2 Participants' efforts to acquire professional assistance and experiences of the assistance received	
g) Participants' suggestions on how they wish to be assisted	7.1 Participants' need for the substance-abusing children to be admitted into a rehabilitation centre	
	7.2 Participants wanting their children to acquire any form of assistance from the social workers	
	7.3 Intervention from government about the availability of drugs	

Table 4.2: Themes and sub-themes

Substance abuse within a family is a complex phenomenon (Smith & Estefan, 2014:24). It is considered a family disease disrupting the entire family system (Villicana, Garcia & Biernat, 2014:429). Although much is known concerning the experiences of mothers, parenting children, abusing illegal substances, a lack of knowledge exists concerning fathers' experiences (Zanoni et al 2014:84). A conceivable explanation for this divergence in the literature, especially in South Africa, is that the focus was limited to fathers' material and financial provision (Hosegood & Madhavan, 2012:259). This section presents a narrative description of the father's involvement in an array of functions in raising children abusing drugs.

Although the goal of this study was to develop an in-depth comprehension of the experiences, challenges and coping strategies of fathers, parenting children, abusing illegal substances, it was essential to explore the participants' observations on their spouse's experiences, which broaden the understanding of some complexities concerning parenting a child, abusing illegal substances.

4.3.1 Theme 1: Participants' experiences of telltale signs of children's addiction

4.3.1.1 Sub-theme 1.1: Stealing from home, and selling items for drugs

Most youths, abusing illegal substances, are involved in petty offences such as stealing from their own families to support their habit. (Omboto, Ondiek, Odera, Ayu & Theygi, 2013:19). Most of the cases relate to youths stealing goods and household appliances for drug usage. Most participants reported that a confirmation for them of the reality of the children's' addiction was that they stole the most basic appliances from their home and from neighbours to sell for funds for drugs. The following excerpts illustrate:

When I try to calculate the things that he has stolen here, they can be between 20 and 30 thousand rand, because he has destroyed lot of things. When you see this fridge here [showing the researcher the fridge], he cut off the motor, and he took the motor out and then sold it. Do you see this light here [pointing the finger to the light at the wall]. It was alright, but he took off all those things and he sold it. He stripped off my bed. I got a steel bed, he sold it.

I started to notice that things at home were getting lost. The room divider used to be full of glasses, casseroles, and other things but now it is empty because he stole all the stuff in there. The room divider is almost empty. There is nothing [he was demonstrating with his hands that it is empty]. His younger sister is the one who told me that her brother is using drugs. This was when other things started to make sense with me.

I said to my son you are looking for extension cords that you sold. But my wife just said I should give him the extension [cord]. I said to her when you come back you will find him taking the extension as he sold and stole all the extension cords we had in the house, and I had to buy a new one that we are currently using.

The other day I sent him to fetch the door for me. He took that door together with the wheelbarrow and sold them. I had to search for him and I found him right at the scrapyard looking dizzy.

He was stealing in the house and selling things; even now when I am talking at this point he does not have shoes. He is selling duvets, containers, Tupperware's, he took them. He is stealing in the house. Everything that he is coming across at home he thought he can sell, he takes it.

The problem started when he steals my things. Now I am not working [employed] anymore. I cannot do anything. Even the building material that I bought while I was still working, he stole them. I wanted to build rooms and sell something in order to have income while I am not working. But I did not manage to do that because of the stuff I bought they stole them and sell them. Sometimes they even steal my money. Sometimes when I am not here, they open my wardrobe and take the clothes and sell them.

He is troubling us. He is stealing. A day after yesterday he stole his mother's plates. They were brand new. R50.00 each. They were ten. He stole them in the morning. He was stealing in the house and selling things. Mmmmmm [thinking], even now when I am talking at this point he does not have shoes. We are buying clothes for him but he is selling them.

The participants' interpretations confirm the assertion that drug abuse perpetuates the crime and other illegal activities empowering the users to support their drug habits (Ikoh, Smah, Okwanya, Clement, & Aposhi, 2019:4). Some of the practised crimes include burglary and pickpocketing. These activities are illegal, whilst negatively influencing the livelihoods of the users' families and the larger communities. According to The National Drug Master Plan (2013-2017:2), addicts' families are under significant financial pressure attributable to the costs associated with theft from family. Some users reported they use drugs before they commit a crime not to feel the pain should they be caught by the community (Petruzzi, Pullen, Lange, Parnarouskis, Dominguez, Harris, Quiterio, Lekpeh, Manobah, Henderson & Borba, 2018:1829).

4.3.1.2 Sub-theme 1.2: Stealing from the community members

The substance-abusing children's need to sustain their drug habits influences the parents' relationships with the community. These include, amongst others things, health and financial damages to others, and increased economic and social costs for the society as the majority of them steal from their families and neighbours (Thege, Colman, El-guebally,

Hodgins, Patten, Schopflocher & Wolfe, 2015:34). Illegal substance abuse is often associated with multiple reoffending/recidivism (Doran et al 2012:749), as the participants' interpretations below illustrate:

He stayed at home, walk around, stealing, he has been taken to jail, and he has been to the hospital when he was stabbed. Actually, he has been [silence]; he has been to the hospital several times. I have also been to the court several times with him because he stole from our neighbours and other people, so they opened a case against him. So, he stole from people and from us.

He stole some Tupperware's bowls, too many things..., watches, T-shirts, clothes. When I do the laundry, he takes the washing from the washing line and sells them. Sometimes he steals from other people as well. So, it is a lot of things that he has done here. As you see the wall [pointing to the wall], he has destroyed the wall, and then I fixed it and he destroyed it again.

People were coming to the house to report that he took their money, their items and stole their things. It did not sit well with me because people were pointing fingers as if I know what was happening and assuming that I am allowing what was happening while I did not understand when I walk on the streets, they talk behind my back, so all those things did not sit well with me.

I do not want them in the house. Do you see how they live..., I want to be alone in my house. That is my only problem. my child...my daughter stole things from people which included cell phones and wheelbarrows. My daughter's boyfriend is also smoking nyaope. So, in that case I have three people who are addicted to nyaope.

The excerpts are consistent with previous findings that substance abuse may result in increased economic and social costs for society, as most illegal substance users steal from their families and neighbours (Yeung, Chan, Boris, & Lee, 2009:255; Thege et al 2015:34). This behaviour is likely to destroy the parents' relationship with neighbours, as some may perceive this behaviour as the moral failure of the parents to raise the child (Smith & Estefan, 2014:420). In most instances, when a family member uses illegal substances, "blaming, stigmatisation and family pathologising" can occur in community circles (Smith & Estefan, 2014:424). Some authors contend that in a community with close social ties, adolescents are less prone to engage in risky behaviour, such as illegal substance abuse, for fear of straining their relationships with the community (Peterson, Buser & Westburg, 2010:370).

Substance abusers risk injuries and death as they hold prospective for attacks (Tharp & Noonan, 2012:515). Attributable to elevated crime levels, community members, particularly in townships, resort to dealing with crime through informal and often illegal criminal justice mechanisms, such as *sjambokking* (beating with a whip) delinquent youth (Monaghan,

2008:83; Martin, 2010:53; Super, 2017:517). Sadly, family members of such delinquent youth are also targeted and their belongings are destroyed or worse, they are banished from the area.

4.3.1.3 Sub-theme 1.3: Signs or symptoms of substance abuse amongst participants' children

Physical appearance is the defining trait and feature of a person's body. According to Nawaz and Jahangir (2017:147), individual physical patterns and appearance describe the person's mood and mental state. These may involve body features, such as hairstyle, wearing and rearing patterns, body cleanliness, and clothing. Continuous drug abuse influences the users' sense of reality and judgement (Doran et al 2012:749; Ikoh, Smah, Okwanya, Clement & Aposhi, 2019:2).

Some participants allude to the general behaviour changes, including the children's hygiene. These observations were espoused in the following extracts:

He told us that he is smoking nyaope. We noticed the behaviour changes as he stopped bathing and not taking his hygiene serious.

It is just that if I can tell you that you can see even his bedroom; you will see that he is a nyaope boy. It is a mess [referring to his untidiness]. I used to see him when he came back at home. He will look like he is drunk but when I smell him he does not smell alcohol, but he looks drunk. You see..., something like that; but I suspected and I told his mother that he is using nyaope.

The participants' observations support the assertion that drug users are usually noticeable by their physical appearances (Jinez, de Souza & Pillon, 2009:247). According to Dennis, Davis, Bernardo and Kelleher (2017:294), the physical health of the substance abuser is negatively influenced; they do not have a pleasant appearance attributable to drug abuse (Dennis et al 2017:294).

The social environment or context where peer affiliation occurs can be an important indicator in understanding these children's behaviour. The strongest predictor of substance abuse during adolescence is the type of behaviour that their friends engage in (Marsiglia, Kulis, Rodriguez, Becerra & Castillo, 2009:156; Beardslee, Datta, Byrd, Meier, Prins, Cerda, & Pardini, 2018:794). Passetti, Godley, and White (2008:100) observe that substance-using peers are a significant indicator that the child could also be involved in

drug abuse. A participant observing that the child became friends with drug-abusing individuals, shared this observation in the extract below:

I saw him becoming untidy. He was befriending people who are smoking Nyaope. He started not to bath, smelling bad. It seems this drug of theirs it does not want them to bath. At the beginning, he was only smoking cigarette; but now you can see that he is using drugs.

The influence of peers was prominent in a child's risk towards substance abuse since strong ties with friends, abusing illegal substances, may encourage a non-user to indulge in substance abuse (Cheung & Tse, 2010:577; Han, Kim, & Lee, 2016: 352). Similarly, several authors (Paiva, Bastos & Ronzani, 2011:1012; Doran et al 2012:750; Weichold¹, Tomasik, Silbereisen, & Spaeth, 2015:883) assert that individuals associating with deviant peers are more prone to engage in substance abuse. This assertion reflects the power of peers in enforcing the behaviour of substance abuse amongst adolescents since they pursue approval of their peers, considering such an approval as a symbol of group unity. The assertion further supports a main proponent of the social learning theory in explaining the effects of peer pressure. According to the proponents of the social theory, adolescents value approval and acceptance from their peers (Engle, Macgowan, Wagner & Amrhein, 2010:274).

4.3.1.4 Sub-theme 1.4: Personal observations and reports from others concerning the child, smoking substances influencing their behaviours

According to Choate (2015:465), the discovery of substance abuse tended to follow three common routes, signifying direct evidence, such as being intoxicated, accidental discovery of small amounts of drugs or bottles of alcohol, and observing a notable change in behaviour in their substance-abusing children. Behaviour changes include poor academic performance, decreased interest in previously enjoyed activities, sudden secretiveness, and defiance to requests and instructions. These routes were particularly evident in the extracts below:

I caught him right-handed with drugs in the house smoking; it looked like a powder and I do not know what they are mixing it with. I do not know these things. That is when I realized that he is smoking, and when time goes by I really saw that he is indeed smoking drugs.

My son sleeps in the shack at the back, you will see the powder mixing with something else using a mirror; and they will smoke it. He said if he can stay one or two days without smoking, he gets sick. Every morning he will ask me R10.00 or R20.00, when

you ask him what he is doing with the money he tells me that he has a headache. If you give him the money to buy aspirin he will then disappear.

I knew because we then started to notice behavioural changes. Even now if you can call her she is not going to respond until the third time. Some other times she is putting her glue in the plastic. The other times you will think that she is in the toilet to help herself but rather she will be smoking. She is smoking it almost every day; even during the day when I am not around. When she smoked glue her child can do anything in her presence and she is not noticing.

Sometimes she is hiding the drugs in the bedroom's dustbin. When she smoked, I notice quickly because her tongue is twisting then I will notice that she smoked.

Adolescents substance abuse can influence their neurocognitive function, with a risk of aggression (Doran et al 2012:749). A participant reported that his child displayed aggressive behaviour in the extract below:

Sometimes when he comes high; we fight over the TV channels. If he is high on drugs, he will carry the TV remote. We are not supposed to watch TV, he is the one supposed to watch, we can only watch TV when is asleep.

The findings are consistent with the assertion by Dennis, David, Bernardo and Kelleher (2017:294) that adolescents abusing illegal substances, normally display aggressive and violent behaviours towards their families and members of the community, although not necessarily whilst they are under the influence of drugs.

4.3.2 Theme 2: Participants emotions concerning discovering their child's drug use

The quality of a parents' relationship and children's behavioural are reciprocally linked. Discovering that the child is illegal substance abuse could trigger various negative emotions and reactions, such as anger, helplessness, disappointment, loss, shame, despair, confusion, frustration, worry, embarrassment, stress, sadness, hurt, pity (Lander et al (2013: 194) Smith & Estefan, 2014:425; Schultz & Alpaslan, 2016:91). According to Stearns and Parrott (2012:408), it is natural and often difficult to avoid experiencing these emotions after such a discovery. These emotions are often intertwined and difficult to separate. These are discussed under this theme and not necessarily as separate emotions.

According to Daley (2013:573), substance abuse disorders harm the family systems and individual members. Those effects on the individual member may include the following aspects: emotional burden, as fathers may feel anger, frustration, anxiety, fear, worry, depression, shame, guilt or embarrassment (Daley, 2013:573; Smith & Estefan, 2014:425). James, Reddy, Ellahebokus, Sewpaul and Naidoo (2017:779) stipulated adolescents risk

behaviours compromise their health, well-being or social performance, whilst frustrating parents concerning their parenting skills.

Some participants could verbalise the pain and sadness regarding their child's illegal substance abuse. The following excerpts substantiate their sorrowful emotions:

My heart is painful when I look at my son.

It is so painful. I do not know what to do. I tried to talk to him, but it never worked.

The impact will vary depending on the responsibility and gender of the drug user in the family.

It is painful and it is not nice. More especially to me as his father. I relied on him because he is the only boy amongst the girls. So, it is not nice. When I look at him, I do not think about evil things for him, but rather my heart is so painful. It is not nice.

Parents experience sorrows when they perceive no progress in their children's future, especially academically (Kraljevic, Banozic, Maric, Cosic, Sapunar & Puljak, 2011:115). The stress experienced by fathers of adolescents, abusing illegal substances, relates to their children's behaviour and adjustment, their well-being and future (Ozturk, Moretti & Barone, 2019:90). Participant enunciated their shattered hope concerning the future of their children in the storylines below:

I feel very sad because I know the consequences of using drugs as we see them on television and newspapers. The drugs are not right at all. It is very bad.

I felt bad because they [referring to his two children who are using drugs] are not working. I felt bad as they destroyed home appliances here in the house and, they have been in rehabilitation centres before and relapsed; they have been arrested and they have criminal records.

It is painful because there is no way forward. Even now as I said she does not have a job. She stayed for a long time without working; even her mother is not working. This kind of a situation is very difficult. It is hurting.

What I am worried about is that if we die, what would happen because he never worked. This is the only thing I am pleading to this child.

My feelings as well as those of my wife are similar. Drugs ruined his future especially now as I was telling you that I found him jobs several times in the company I am working and he was always absent at work and I had to talk to the managers until they dismiss him. I realized that these things are destroying his future, even now when I look at him my heart is sore as I do not know what is going to happen to him when I am gone.

Sometimes I wake up around 3:00 at dawn thinking about her because if I die what is going to happen about her future and her small child.

This thing is really frustrating me, and my worry is her child. I am worried about the child's future. She is smoking it at 12:00am. Sometimes I will hear the door opening, when I check I will see the lights; and I will find her sitting in the dark smoking glue.

I am feeling very bad because it was a shock to me. It was thinking that she was going to help her siblings if she can be done with her studies. So, now I felt very bad and my heart was sore; not knowing what to do and how are we going to help.

The findings reveal the participants' stress and concern about the future well-being of their children when they (participants) die. The participants' concerns have merits because in their study Goldberg and Carlson (2014:763) contend that greater behavioural problems during childhood link to a range of adverse outcomes later in life, including school dropouts, greater risk of unemployment after leaving school, drug abuse, mental health problems and criminal behaviour. Ferrey, Hughes, Simkin, Locock, Stewart, Kapur, Gunnell & Hawton (2015:1) affirm that several parents are concerned about the future of their children as they considered their vulnerabilities, expressed concern about their ability to cope as adults.

Although it was customary for mothers "to do everything they can" to secure the futures and well-being of their children (Prikhidko & Swank, 2019:1), it seems the traditional function of males as distant breadwinners is changing (Herland, Hauge, & Helgeland, 2015:243). It was disheartening to establish that a participant was willing to afford his own life if such a noble act could stop his child from illegal substance abuse:

I just do not know what to do. Do you hear me? [asking the researcher] I can sacrifice with death if that means she can stop smoking glue.

I did not really know what to feel. I just really do not know what to feel. I just looked at him when he comes back late in the evening....,

They turned against me, since they started using drugs they started to come back home at night. It was like a nightmare. I think too much about it. Sometimes I think in such a way that, I found that my brain is more like hitting on the wall. So, I really do not know what to do [he looked emotionally drained]; because I tried all what I think might have helped, but so far, I could not find any solution.

Substance abuse by a family member influences the user and the whole family, therefore addiction is also called a "family system disease" (Smith & Estefan, 2014: 429). The extract below reveals that family members can be exposed to physical danger when the participant's child left doors unlocked.

The challenges are that, if he is not at home I do not sleep especially at night. He is not sleeping at home. He will open the doors at night and leave them unlocked. When I realizes that he is not home to smoke drugs I have to deal with it. He is rude, not speaking nicely with me

Men who become fathers relate to fatherhood and what it takes to become a good father (Herland, Hauge & Helgeland, 2015:245). The child's illegal substance abuse may threaten the strongly held beliefs about what it indicates to be a "good parent" (Smith & Estefan, 2014:424). Illegal substance abuse by participants' children led some to question their parental abilities, as the excerpts below reveal:

He is disrespecting me. According to him I do not have value. Yes, I am his father, but to him I am not his father. If really someone is your father, you cannot go to his wardrobe and take all his clothes and shoes and sell them especially now because I am not working. I do not have clothes, he sold them. He used to have nice clothes, he also sold them. This is stressing me.

The challenges I have is that they are different because they are using illegal substances. It is difficult. Sometimes I have stress especially when you look at him as your child. My heart becomes sore as a parent. I asked myself, when is this going to end. When is, he going to stop using illegal substances?

I am not feeling alright. Sometimes I cannot sleep at night thinking and asking myself, what I have done wrong. There are things that he did which did not sit well with me. I am not happy at all. I am even sick, I had high blood pressure because of thinking too much stress.

I was blaming myself because I think for me not being at home all the time and not being close to him is the cause of his drug usage. I think he could not be able to approach me when he was experiencing challenges. One day he told us that they were abusing him on the streets that his friends were abusing and bullying him on the streets.

I had a painful feeling. A very painful feeling because it caused me stress and I started blaming myself that it is my fault that he ended up using drugs. I asked myself so many questions that I could not find the answers; but I personally blame myself. I am not talking for any other people. I blame myself.

One participant questioned his relationship with God, as the extract below emphasises:

I do not know what to do. My life is not good. I feel like God is punishing me through my child because there is this thing that if we did some evil things, the punishment will go to the children. Even today I did not go to church waiting for you. I usually go to church so that they pray for me because they know my child's problems.

According to Becon, Martí'nez, Calafat, Juan, Ferna'ndez-Hermida, Secades-Villa (2012:2), parents usually associated with substance abuse with neglectful parenting, failing to guide their children properly. This self-blame may result in decreased self-worth, hopelessness, sadness, depression and contempt towards oneself (Zahn, Lythe, Gethin, Green, William, Young & Moll, 2015:337).

Drug abuse can be a source of embarrassment for the users' families (Richardson & Van Brakle, 2011:322). For some participants, their children's drug abuse brought shame and embarrassment because of their standing in the community.

I do not feel good. It is disturbing me. I am a Pastor and when I talk to the congregation I just feel as embarrassed as they could say I am preaching the word of God while I cannot discipline my own child. It is disturbing me.

I feel shame for my child because I never believed that it could be my child who can do those things.

Families of illegal drug abusers experience emotions of helplessness, frustrations and doubts, contributing to increased anger (Mak et al 2010:2). Some participants reported emotions of anger because, despite being well looked after as kids, they turned to drugs:

It creates anger, sometimes I ask myself what I have done wrong to them if they do these things. Because I think for them. I have been behind them since they were small. I looked after them; they never struggled with clothes; they never struggled with anything. If there is any chance that he can leave the home; I will be happy. That is what I can say.

In some instances, this anger and frustration may lead to physical abuse, as demonstrated in the extracts below:

I keep on saying that the way you are doing it to me, I might do something bad that I do not want to do, but they are pushing me in the corner that may be danger to them. Last time I told them that sometimes we watch on the news that certain men have done something bad to their children and we all get surprised how can he do that but because we do not know how much pressure they put on that particular father; then we think he just do it because maybe he was mad or whatever but it is because he was forced by the behaviour of the child.

I beat him up so that he can tell us the truth. I beat him that day, which is wrong according to the law, but after I beaten him up he told us the truth. The following day I took him to the clinic. I can shout, rebuke and leave the house when I am angry to have peace.

The participants' narratives corroborate findings from previous studies, indicating children displaying problematic behaviour may also trigger destructive parenting strategies and characteristics (Lee, Zhou, Eisenberg & Wang, 2012:57). One such common strategy is authoritarian parenting, characterised by punishment, harsh discipline, and physically restrain (McKinney et al 2016:1209). This frustration can lead to death, as it was the case with a Cape Town (South Africa) mother, sentenced to a three-year suspended sentence and community service for killing her tik-addicted son in 2007, enduring years of mental and

physical abuse from her son (www.dailymaverick.co.za/opinionista/2018-09-13-the-ellen-pakkies-story-getting-to-know-the-mother-driven-to-kill-her-son).

4.3.3 Theme 3: Effect of the child's illegal substance abuse on family relationships

According to the family system theory, the family is a complex, dynamic, and integrated whole where each member influences and is influenced by other members (Goldberg & Carlson, 2014: 763). A family is widely regarded as a unit (Galovani, Holmes, Schramm & Lee, 2014:1847; Smith & Estefan, 2014:424) or a system (Peleg-Oren, Rahav & Teichman, 2008:254). Substance abuse by a family member upsets all aspects of family life (Lander et al 2013:194; Choate: 2015:461). It influences the family structure and its functioning; it changes how family members fulfil their functions (Smith & Estefan, 2014:424). It becomes the family's priority. Families become frustrated and confused by their children's ongoing illegal substance abuse. Excessive use of illegal substance contributes to the destruction of family relations (Schafer, 2011:1). Some of the participants' marital relations were strained by the children's illegal substance abuse, as the extracts below illustrate:

It nearly broke up our marriage with his mother because there was always tension between me and my wife as she was saying that I am rough on him as I am not the biological father until my wife sees it by herself.

My heart was very sore because when she smoked glue her mind is not working. She is very much addicted and she is old. You know my life it is not good. Some other times I fight with her mother.

It is not alright at all because even his mother is saying I do not love him. So, I then tell her that it is not like I do not like or love him, I only hated his behaviour. I love him, but I cannot be fine with him when he is taking grocery in the house and sell it on the streets, and then I say I love him. Nooo.., I cannot do that.

The findings support the assertion that one family member abusing drugs as a "disease that disrupts the entire family system" (Smith & Estefan, 2014:429). The family disease approach considers substance dependency of the individual and the family because the user's life influences the emotions, thoughts, and actions of the entire family. Some participants' responses indicate that the child's addiction influences the whole family order, communication and the participants' relationship with the addictive child, reflected in the excerpts below:

So, when my wife is around I keep quiet like I am not in the house. They can talk, but if you can see that they can really talk is when I can go outside you will hear even their

voices that they are so happy. So, when I am around it is as if I am checking what they are doing. They have that thing about me.

We are all feeling bad in the house because we sat him down many times trying to talk to him and he will agree with us that time but immediately when he smokes he is a different person

We are very sad, we are not communicating well at home. Some other times I might have a conflict with my wife because he steals.

The findings reinforce the assertion of Brezina (2010:462) that illegal substance abuse by a family member can change how families relate. According to Schultz and Alpaslan (2016:90), “such changes are often characterised by distorted communication and a lack of understanding among family members”. Mothers and siblings are often the targets of verbal and physical intimidation from the users. They are fearful of the users, with some leaving their homes (Groenewald & Bhana, 2016:647). One participant in the excerpt below also expressed this observation:

My wife is scared of the child. She is scared of him. She does not want to face him.

The extract below demonstrates that illegal drug abuse by a family member can influence family cohesion.

In our house, children do as they please. There is no family time, no dinner time where we sit as family at the table and eat and my wife dish up for us. Anyone who wanted to eat can they go to the pots and dish up for themselves. You see.., something like that. We are a family that does not have rules; it is not right.

The relationship was alright. However, after using drugs he hardly comes in the main house and eats supper with us. It is now not good.

Family cohesion is the extent that members of the family engage or disengage psychologically (Peleg-Oren et al 2008:254). Kalyva and Melonashi (2014:654) contend that the level of family cohesion can predict illegal substance abuse by the adolescent. For instance, they associate a high level of family cohesion amongst adolescents. According to these authors, a high level of family cohesion is often accompanied by adequate parental monitoring and close family bonding.

4.3.4 Theme 4: Effect of addictive behaviour on the relationship between participant and child

Illegal substance abuse by children can lead to an increase with difficulties in parent-child interaction and relationship (Gordo, Oliver-Roig, Martinez-Pampliega, Elejaide, Fernandez-

Alcantara & Richart-Martinez, 2018:1). Parents, in particular, fathers are happy about relationship breakdown between them and their children attributable to the children's behavioural challenges (Goldberg & Carlson, 2014:762). Most participants were explicit concerning the relationship turning "bad", reaching anger. One participant reported feeling "disgust" towards their child:

He disgusts me. I wish he was not staying in the house. Right now, at the police station, they said he is not supposed to be in the house, but for me I feel like he can. We took him to rehabilitation centre for two months. If someone can go to the rehabilitation centre and you cannot miss him instead you get the freedom. We do not even notice that he is not around the house because he is naughty

The extract suggests that although it is generally believed that parents supportive of their children, may protect them against substance use, some children abuse illegal substances regardless (Yeung, Chan, & Lee, 2009:255; Kalyva & Melonashi, 2014:654). Most participants attested to a good relationship with their children before their addiction. They explained that the relationships had since deteriorated because of the children's drug abuse.

It was the best because he is the first-born. Can you believe that from birth, I spoiled him with everything, clothes, toys and other stuff? There was no toy that he never had. Clothes were many; I can say he had everything. He flew with an aeroplane from Kagiso to Cape Town. Everywhere I went, I ensured that he went too. That is why I say I blame my disability he could have been fine, or maybe my disability affected him and he then did things as he pleases. Sometimes I blame myself.

It was very good. It took them to school and provided them with everything, especially the boy. I took him to study security and he worked in a firm but he just left the job without a reason. The girl never worked.

The relationship was very good. It was very good because I used to trust and then, it started silently because I used to put money everywhere, I could not hide any money in the house during that time, and I started to notice that if I put money in certain places and all of a sudden when I come back the money is missing.

It was good too much. He grew up very easy. He got everything that he wanted. He never got short of anything. I never bought myself tracksuits of R800.00 before, but I started buying a tracksuit of this amount for him. I am doing everything that he needed. I buy brand new clothes that I never wore it, but he is wearing brand new with my money. Do you understand that the relationship was good, between me, him and his mother? There is nothing that can actually make him to do the things that he is doing now. He just left everything, life being good.

It was good, very good. We were treating each other good because we [the participant and his wife] were putting our hopes on her as she was at the university four years. We then hoped she will finish and end the poverty that we are experiencing

The extracts indicate that the addictive behaviour of the child destroyed the previously good relationship. Contrary to the widely-held assertion that socio-economic status during adolescence is a risk factor for substance abuse (Petruzzi et al 2018:1834), the participants' interpretations strongly suggest a weak or no correlation between the family's economic status and substance abuse by children. Skrobanek and Kuglstatler (2019:144) posit that the social class of the adolescents does not affect their patterns of substance abuse.

A possible explanation for this assertion is parents control over children transition from childhood to adolescence decreases as children increase autonomy and independence (Beardslee et al 2018:784). As children enter adolescence, they are confronted with new life demands and expectations in school and their personal lives (Keshavarz & Baharudin, 2013:253). Although parental control and influence are important during adolescence (Padilla-Walker & Memmott-Elison, 2017:1054), this developmental stage is characterised by the tendency to engage in risky behaviour, such as substance abuse (Peterson et al 2010:369). A parent reverted to disappointment when the relationship with their children is broken attributable to their child, abusing an illegal substance.

I used to love this boy but since he started using drugs, it is a problem. I was so happy when we have him as he is the only boy; now I regret why I have a child boy. I regret. Even now when I see someone giving birth to a baby boy, I feel sorry for them as I do not trust boys.

Goldberg and Carlson (2014:762) report that parental relationship quality links to their children's behavioural problems. In the extract above, it is evident that the parent's disappointment links to the child's gender. Similarly, Le, Saluki, Day and Emily (2018:1) contend that the child gender may elicit difference in parental expectations and the positions parents expect their children to assume.

Some participants reflect the importance of positive parenting, including encouragement of appropriate behaviour (Sheidow, Henry, Tolan & Strachan, 2014:1356). Despite their children's drug abuse, some participants recognised the importance of the relationship with their children, as the extracts below illustrates:

Our relationship has not changed because the child is my happiness and love. If he needs something, he will speak to his mother. The two of them can talk like when he needs money. He does not just come to me because he knows I will ask him what he is

doing with the money because there is food in the house. That is it, and what I do not like his friends in the yard.

Our relationship was good all along, even now it is still good. It has not changed because if I can say wash the car, he will do, if I can say to him do something he will do as well, even if I can send him somewhere he will go and come back. Like now when you were waiting for me in the shops he came to me and I said to him do you see that lady in the black car she is waiting for you let us go home.

The relationship was good; even now when she is using glue we will having a good relationship, but the problem is glue because she does not want to stop using it.

It was very good. He was listening to me, attending church; he was a Sunday school teacher. He was alright. But I do not know what changed. A friend of his, who stays alone, he is the one who negatively influenced him to smoke drugs.

The relationship is good, I am not angry with her. I speak to her nicely as usual....I am not feeling right. It is not like I hate her. If you can call her now she will tell you that I am doing everything for her. There is food in the house, we cook, but still she smokes.

So well, despite that the relationship is right because he sleeps at home and eats at home; we do everything with him

The relationship is still alright, but just because he destroyed my things. I decided to buy others with my own money. It is not nice..

I feel pain, but still I do not keep her far from me, I try to help her so that we can have a good relationship between me and her mother. We are trying to assist her where we can.

It is painful. It is totally not nice. But what remains, I make sure that he does not go to bed with an empty stomach. There is no way that I can say I chase him. If I chase him, where am I supposed to chase him? He is my child. He messed up, it is fine.

The participants' supportive and non-judgemental attitude as espoused in the extracts, emphasised the importance of parental support. According to Tharp and Noonan (2012:516), children are more prone to desist from risky behaviour, such as drug abuse, if they sense that the parent is caring and supportive. Beardslee et al. (2018:784) contend that children who established a close emotional bond with their parents are less prone to engage in substance abuse.

4.3.5 Theme 5: Mothers' involvement in addressing the child's illegal substance abuse

Although parenting should ideally involve both parents, in reality, the focus is predominantly on the mother (Shirani et al 2012:26). Some authors contend that mothers assume the function of the primary caregiver (Le et al 2018:3). According to Choate (2015:463), mothers carry the heavier burden and pressure from the society, expected to be successful

in their function in the family as primary caregivers. In some incidents of parental disagreements, the common thread revealed by the narratives is that participants appreciate someone to share the responsibility with. The participants' interpretations reveal the emotional and spiritual support from their spouse. Most importantly, the findings reveal the varying parentings, expectations and attitude amongst parents, determine how they respond to their child's substance abuse.

4.3.5.1 Sub-theme 5.1: Emotional support, spirituality and discipline

Spiritual support concerns individuals assisting each other to protect, maintain and gain all dimensions of their existence. Spiritual support provides driving force to afford person stability, meaning, fulfilment in life and faith in self (Alorani & Alradaydeh, 2018:291). Some participants' partners relied on divine intervention for strength:

She gets home in the evening and just to kneel down and pray. Sometimes she would go into my son's room and pray for a long time. My wife is a praying woman.

This storyline depicts the belief that some individuals have in God and the extent to which they feel the guidance of God is necessary to assist with their problems. Individuals resort to prayer to pursue meaning in life (Allen & Lo, 2010:434). Religion, therefore, has a positive impact on pain, anxiety, decreasing depression and coping skills, whilst enhancing the quality of life (Bulduk, Usta & Dincer, 2017:852).

Motherhood is often associated with a warm and caring attitude (Villicana et al 2017:867). From all familial relationships, the mother-child relationship is likely the most important (Bojczyk, Lehan, McWey, Melson & Kaufman, 2011:453). Some participants acknowledged the function of their spouses, consulting with them regarding their substance-abuse child:

She is trying. She will bring her closer to her to show her guidance. It does not matter that you are already into drugs; we cannot give up on you. We will try to help you so that you can be able to stop using drugs.

Support from his mother is too much. We support him. We do not make noise at home. We talk softly to him because he is also a man of few words.

I normally share my concerns about his behaviours with my wife and then my wife will go into his bedroom and find something like papers that they are using; and the one for Cigarettes.

There is nothing that I am harassing him about. I just ask his mother about the things that are going missing. His mother will say, do not ask man of God, if you do not see it where you put it, just know that it is gone. I then keep quiet, I do not even ask him where

is this and that. I just make noise to his mother because I know that if I put something here, and I do not find it; and ask his mother, she will tell me that he is the one who took it.

Sometimes when I am with him, he listens. The problem started when he is high on drugs. I will say some bad things to him but my wife will intervene

The findings suggest that emotional support in treatment planning in South Africa can improve recovery in general, with a critical function in recovery from substance abuse disorders. Emotional support assists drug abusers, whilst also assisting professionals to understand the complex nature of this challenge in South African (Hanif & Riaz, 2018:12). Yi, Wai Li, Xiao, Ma, Fan and Dai (2018:995) contend that emotional support reduces loneliness, with a strong influence on a person's psychological well-being.

Another finding from the participants' interpretations was the important function of mothers in discouraging children from using drugs. Parental supervision and monitoring the children's peers can reduce the time the child devotes to friends (Chartier, Negroni & Hesselbrock, 2010:2; Beardslee, Datta, Byrd, Meier, Prins, Cerda, & Pardini, 2018:784). A participant's wife resorted to influencing her child's choice of friends, as the extract below illustrates:

She [the participant's wife] is trying because sometimes she will chase away his friends and tell them that our son is going to work. She is trying by checking all his friends to see if they are good for him.

The finding is consistent with the assertion that parents can limit the influence of deviant peer groups through parental monitoring (Alhyas et al 2015:5) and an increased awareness of children's activities by establishing and enforcing acceptable boundaries (Tharp & Noonan, 2012:516), such as "regulating curfew times on school nights and weekend nights, tracking social relationships, supervision of activities, and maintaining rules around communication when children are outside of the home" (Marotta & Voisin, 2017:2). Parents aware of their children's activities and whereabouts are likely to protect them from associating deviant adolescents and engaging in drugs (Shi, Steen & Weiss, 2013:426; Lippold, Greenberg, Graham & Feinberg, 2014:1803). Conversely, some authors contend that inadequate parental monitoring, vague rules communication and inconsistent discipline may contribute towards the children's drug abuse (Chartier et al 2010:2).

Higgins, Piquero and Piquero (2011:1278) caution that relationships with peers are important for development and behaviour during adolescence. Parents strive to establish a

close relationship with their children (Alhyas et al 2015:5) since parental monitoring is more than control of children's whereabouts and activities. It entails voluntary disclosure of information by children (Kliewer, Pillay, Borre, Zaharakis, Drazdowski, & Jäggi, 2017:248). Support and understanding are regarded by some authors as the most effective strategies encouraging disclosure of intimate emotions, including substance abuse (Alhyas, Al Ozaibi, Elarabi, El-Kashef, Wanigaratne, Almarzouqi, Alhosani, & Al Ghaferi, 2015:9).

Substance abuse amongst adolescents harms the relationship between mothers and their adolescent children, leaving mothers frustrated and angry (Charoenwongsak, Kinorn & Hongsanguansri, 2017:1). The children's behaviour evoked the mothers' emotions of anger, as some participants explain below:

His mother sometimes will talk about some evil things and say she feels like putting poison in his food because he is treating us bad. Sometime we will put money in the house, but it will disappear.

They are close, but after finding out that he is smoking drugs she kept a distance. I tried to speak to her to continue being close to him [the child] as they have been close before so that she can be able to find out what it is exactly happening with him. But she was already having anger and impatient with him. She was no longer talking to him.

There are times when she is pissed off. One day I found her in the room beating him badly.

The extracts reveal that parents can also be angry with their children when they abuse illegal substances. In a desperate effort to enforce discipline, some mothers can resort to harsh and illegal disciplinary strategies, such as beating (Prikhido & Swank, 2019:2). Authors contend that parenting discipline can be influenced by various factors, such as the age of the child (Carvalvo, Fernandes & Relva, 2012:32). Previous studies suggest that a coercive disciplinary strategy may intensify discourage using anti-social behaviour, such as abusing illegal substances (Lee et al 2012:57). Conversely, discipline practices focusing on communication and non-violent conflict resolutions, relate to increased moral development (Mckinney et al 2017:291).

Fathers are usually observed as all-powerful patriarchs wielding enormous power over their families (Lamb, 2010:2). This assertion was emphasised by one participant who indicated that the child communicates with his wife rather than with him, as stipulated below:

He only talks to me when he needs something. Lot of things he talks to his mother. He is scared of me His mother listens to him. She will say he is saying this and that. He could

see that he is messing up in the house. He does not want to see anything or else he will steal. It is not good. But, If I did not care about him I would not be here today to do this interview.

The participant's description confirms the assertion that mothers are often socialised to assume more caretaking and warmth-related functions than their male counterparts (Villicana et al 2017:868). Although fathers are increasingly becoming involved in their children's upbringing (Villicana et al 2017:868), traditionally fathers were responsible for ensuring that their children grew up with an appropriate sense of values. It is therefore common for the children to establish different relationships with their mothers and fathers (Cottee & Roman, 2014:28).

4.3.5.2 Sub-theme 5.2: Participant's observations regarding the mother's attitude towards drug-abusing children

Mothers and fathers are likely to engage in different types of parenting with their children (Smith & Estefan, 2014:425). The parental disagreements on responding to the child, abusing drugs, are inevitable influencing the marriage negatively. A tendency to blame the other partner is common, as it was apparent in the storylines below:

I said to her [the user's mother] you are a Christian, but you do not face the child and you need to be honest with him if he did something wrong. She loves him like a lot.

I had a feeling that she is protecting him because most of the times she will tell us not to do other things for him as he is also part of the family. Even if you can report to her that he did something, but still, you can see that she is protecting the child.

What bothered me is that she gives him money to buy nyaope. That it is not right. And she will cry that her money is missing. Now my son loves his mother more than me because I do not give him money to buy nyaope, but rather I buy food for the house.

The findings confirm the assertion by Tangney, Stuewing and Hafez, (2011:706) that shamed parents whose children are illegal substance abusers, often attempt to escape painful emotions of shame, guilt and self-blame by externalising blame and anger onto other people. A gender bias often exists when children engage in anti-social behaviour, such as drug abuse,; questions are directed concerning the function of parents (Smith, Estefan & Caine, 2018:512). Society often observes mothers as the parent responsible for their child's drug abuse (Smith & Estefan, 2014:27; Prinkhidko & Swank, 2019:1). Conversely, mothers are often established to demand full and often selfish control of the childcare responsibilities. This attitude was termed maternal gatekeeping by Barry, Smith,

Deutsch and Perry-Jenkin (2011:1502). In reflecting on the personal and gendered social beliefs about the good mother and what they do concerning their son's substance use (Smith & Caine, 2018:512):

I thought that loving Josh more could prevent his addictions. Counsellors told me that my overprotectiveness was the problem and that I needed to detach myself from Josh because he was trying to become his own person. I felt blamed and shamed.

The findings further revealed that parentings are also influenced by numerous factors. One participant observed that his spouse had a 'soft spot' towards their child because he is the youngest of their children, supporting this assertion in the extract below:

You know women they have this thing that if the child is the last-born. The way she loves him, I even though he wanted to take my space.

The extract supports the observation by McKinney and Renk (2008:807) that parents may adopt various parentings based on the child's gender. Conversely, Carvalho et al 2012:32) concede that factors, such as the age of the child, the number of children and their birth order, may influence parents' disciplinary methods. These factors are predominantly determined by the societal norms and expectation (Le, Sakaluk, Day & Impett, 2018:1). For instance, some cultural practices encourage children to be treated differently depending on their gender and age. The last born male child is often treated with a lenient approach because it is alleged that he will not move from the family house but will stay and take care of his elderly parents. Some parents experience an emotion of powerlessness when nothing they attempted seems to be effective. One participant's wife sought the assistance of social workers when the child's illegal substance abuse persisted, despite her efforts to talk sense into the child:

She tried to rebuke him, she tried to talk to him almost every day, but at this point she gave up because she took him to the social workers; and some other social worker took him to the Rehabilitation centre, but he only stayed week and during that time we sent him money, visited him, however, after two weeks of being admitted at the Rehab Centre he came back. He told us that he is no longer smoking drugs but after two days from the Rehab Centre he used again

The extract is consistent with similar findings from the literature, illustrating that when parents feel hopeless, they are more prone to reach out for assistance from professionals, such as social workers (Choate, 2015:468). Choate (2015:468) reports on a parent who shared the following experience when they realised that nothing seemed to be working: "I

called social services. I was just trying to get help because we realized things had got out of control very quickly”.

One participant reported that his wife became disheartened and gave up when their daughter smoked the “glue” inside the house.

My wife does not like it, though she does not know what to do. The other day she was sitting right here at the corner of the couch and her mother sat playing Television games and she was busy was smoking glue. I then asked her mother why she is sitting while the child is smoking glue. Sometimes she will come home at 12:00am and her mother will open for her as she said she does not want her child to be killed by other people. And I never agreed with that as I was thinking of punishing her to stay outside or on the street to be a street kid then we can raise her child.

Some authors reported that parents may avoid disciplining the child for fear of escalating the child’s behaviour (Sheidow et al 2014:1356). Schultz and Alpaslan (2016:91) report that some families of substance-abusing member may use avoidance and ignorance as a coping strategy. Mothers are more prone to feel inadequate, blaming themselves for their child’s behaviour (Smith & Estefan, 2014:27). Mothers observe their children as an extension of their own identity. The perceived failure to fulfil the function of a perfect mother and control their children’s errant behaviour could lead to conditions, such as depression, anxiety and guilt (Prinkhido & Swank, 2019:2).

4.3.6 Theme 6: Participants’ coping strategies

Parents of drug-abusing children need support as they struggle to cope, whilst enduring stress (Ozturk, Moretti & Barone, 2019:90). Participants’ experiences revealed they struggle to cope because they do not know what to do anymore to assist the children. They use phrases like “a big burden”, “struggling”, “have sleepless nights”, acknowledging they cannot cope. According to Collins, Onwuegbuzie and Jiao (2010), a need exists to identify the reasons why certain coping strategies are employed, when they are used, and when/why they work.

4.3.6.1 Sub-theme 6.1: Participant’s struggle to cope with the children’s addictive behaviour

Socio-economic such as parents’ employment status, can influence how parents raise their children (Voisin¹, Kim, Bassett & Marotta, 2010:09; Le et al 2018:4). The coping skills of

some participants are constrained by their employment status, as illustrated in the extracts below:

I have a big burden on my shoulders, so it is very difficult to cope [sigh]. It is very difficult to cope. I have to go to school every now and then, because they do not cope with studies when they started with drugs... have to cook for them, I have to wash for them for the plates; I have to make sure I go and look for food. I am not making money, but I try to get something on the table for them. So, they do not appreciate that.

I struggle to cope especially now since I am not working; but I found an odd job by doing the gardens so that I can be able to ensure the situation here at home it becomes better. Even my wife, she is looking after the children for the mothers working as domestic mothers.

I am not coping. It is difficult to cope because there is nothing coming alright. When you try to block him this way, he uses another way.

There is no anyway that I cope with this situation because most of the time I have stress. We just feel like we can hide him somewhere so that you do not see him.

The participants' narratives experience what is termed 'parental stresses' by several authors. This is defined as a set of processes leading to aversive psychological reactions to the demands of parenthood and are experienced as negative feelings toward and about the self and the child (Gordo et al 2018:1). This parental stress is associated with parents' abilities to exercise control over their children's behaviour (Terrett, White & Spreckley, 2012:18). Unfortunately, children may perceive these constraints as a sign of inadequacy (Voisin et al 2018:4); thus, impacting the parent-child relationships which negatively impacts (Cottee & Roma, 2014:27).

4.3.6.2 Sub-theme 6.2: Participants' efforts to acquire professional assistance and their experiences thereof

Most participants attempted professional assistance for their children's addictive behaviours but the efforts failed. The relapse phenomenon was attributed to several factors, emphasised in the narratives below:

I did try to go to the social workers; but the problem is that they [users] do not want to go to the social workers. The first time I went to the social workers I explained to them what it is that they are doing. The social workers talked to him, they talked to me; they said I must not force him to come if he does not want to. So, I also noticed that he is not serious about getting help.

I took her to the social worker so that she can get help because the social workers are the ones who know about her addiction, they will know how to deal with this in order to help her maybe by taking her to the rehabilitation centre. The only challenge we have is

that the social workers took her to the rehabilitation centre previously, so now we have to start afresh with the rehabilitation centre processes. She was taken to the rehabilitation centre, however, she came back weeks before she had completed the treatment.

We tried to take him to the private rehabilitation centre at Westonaria. We paid an amount of up to R18 000 and he stayed there for three months, but when he comes back he went back to his things. Now I was thinking that if there is any other way, it would be better.

We only went to the social workers, they tried to help him. They came here to fetch him to go to the Rehabilitation Centre. While he was there he demanded clothes and other staff. However, he discharged himself after being admitted for a week. I found him, a job with the hope that things will be better, they dismissed him, went back to the same job again as they have given him an opportunity but it never worked.

I did not get any help because when we take him to the rehabilitation centres, I do not see any changes. I did not see anything better.

I tried a rehabilitation centre, he stayed there for two and a half months, instead of three months. And the group of boys that he was admitted with them, they discharged themselves within five days of admission. I tried again this other rehabilitation centre at Westonaria. His mother paid R900.00 if not R12 000.00. It was three thousand Rands a month [he was calculating with his fingers] as he stayed for four months. He completed the treatment, came back home but he used again.

We only approached the office of the social worker this month, so they are trying to help him. They mentioned that they have to counsel him before they can refer him to the rehabilitation centre so that he can stop using drugs.

I do not have any support, but the only thing that I requested at work is..., we have social workers at our head office, when we have problems we contact them because I was not coping at work. I was making lot of mistakes and always having anger because of that. I was communicating with the social workers telephonically and they were guiding me on how I can deal with the matter. I was right for two to three days but because I dealt with the issues alone as he is not around now. I do not know how to put it. They were giving me the solutions but the child was not around; and when I come back home he was doing the opposite. It was not working for me.

The findings strongly suggest despite the social workers' efforts to admit substance users to the rehabilitation institutions, relapse remains the greatest challenge. Substance abusers lack motivation for treatment for various reasons. According to Conner, Longshore and Anglin (2009:151), substance abusers need the desire to receive help, be ready and be able to identify the drug problem; otherwise, nothing will convince them to stop substance abuse. Unfavourable home circumstances may contribute towards a relapse (Appiah, Danquah, Nyarko, Ofori-Atta & Aziato, 2017:104). Gender influences individuals' motivation to seek, enter, and complete treatment. According to von Greiff and Skogens (2017:189), males are often motivated by a spouse and friends; females derive the motivation from their parenting responsibilities.

Although social workers form core members of the multi-disciplinary team in rehabilitation centres, their contribution to the treatment of patients abusing substances is inadequate (Clark, MCGovern, Mgbeokwere, Wooten, Owusu & McGraw, 2014:453). Sesleng and Ulvik (2018:218) report that social workers are often unsure of their function in social abuse concerns. The authors concede that social workers' understanding of change concerning substance abuse is important and it should be considered concerning relapse. Relapse should not be observed as an event or failure but as a process (Appiah et al 2017:105). Although the child continued to use drugs, one participant sought assistance from the church:

I took him to church. At church, they told me that they can assist us so that he can stop using drugs. However, what I understand is that he has to go to the church, but he only went two times and stopped going there. He is not consistent in that. He goes when he likes. So, we are struggling with that.

The extract is consistent with the assertion from Davis (2014:244) that faith-based organisations are increasingly becoming involved in providing services in substance abuse. There are questions regarding the function of the church in substance abuse. Reports indicate that faith-based programmes employ diverse approaches to substance abuse. Some of the churches discourage individuals to continue with medication whilst in their care (Davis, 2014:244). Some participants indicated abstaining from consulting professionals either from ignorance or the assistance received was unsatisfactory:

I never looked for help because I did not know where to go to get help when a child is doing drugs. I heard others saying they went to police station to report and the response was that we beat our children, but when you beat the child they arrest you. I never went anywhere to seek help; this is the first time today coming here to seek for help.

I did nothing, but I am supportive if a child has something that can help him. That is why I told you that I suggested to him to go to church to be prayed for. I saw lot of people who are delivered from drugs. But they said since they just started with the rehabilitation processes, I should let them to finish as long as he can get help so that he can work.

I was even thinking that if I can find someone like a medical doctor that can help her to stop smoking glue I was going to do it. I am not feeling good even for her to go to the rehabilitation centre, I was the one who was putting more efforts than her. I also went to the social workers; and that it is not seating well with me. They told me that as she is 21 years old and if she does not commit by herself it is going to be difficult. And at the social workers offices they deal with children who are 18 years old and below.

I told myself that I am not going to do anything.

The participants' narratives are consistent with the assertion of Choate (2015:463) that with members' persisting drug abuse some families may reach a stage where they disengage

and withdraw from the problem. The lack of rehabilitation institutions in communities, particularly in underprivileged and socially isolated areas, was emphasised by Richardson and Van Brakle (2011:326) as a major contributing factor in drug abuse. Mokwena and Huma (2014:360) contend that the unavailability or lack of rehabilitation opportunities and the increasing usage of illegal substances by youths is a disadvantage to society and families. This led families believing that there is little hope for their children to obtain assistance regarding their substance addiction.

4.3.7 Theme 7: Participants' suggestions on how they require assistance

4.3.7.1 Sub-theme 7.1: Participants' need for substance-abuse children to be admitted into a rehabilitation centre

Rehabilitation institutions are primary resources for several families with limited financial resources (Richardson & Van Brakle, 2011:326). This was evident in the extracts below as the majority of the participants expressed the need for the child, abusing drugs to be admitted into rehabilitation centres for treatment.

My wish is for them to go to the rehabilitation centre, but my worry is that they are not interested. So, if they can get help on substance abuse, and that would please me. That would please me if it can happen. I think that it is what I can say.

I would like him to be taken to the rehabilitation centre, maybe when he comes back, he might come back being better because now he could see that he is suffer, because even us when we have money we give him money to go and buy drugs, even though we could see that they are killing the child.

My request for me is for him to be taken to the rehabilitation centre, maybe when he comes back he might be different.

I was thinking that he can be taken to the rehabilitation centre for a long time whereby he is not even asked when he has to go there. He went to jail the previous year, when he comes back he was clean and neat, but now he is back into drugs.

I wish there were government rehabilitation centres because honestly speaking the private rehabilitation centres are very expensive. I wish there was the government one where they can help us especially if they can consider families like us as I am not working whereby they can stay for a long time as the once that they stay for three months, they are not useful; at least a year whereby they do not even allow visitors until they completed their treatment.

Substance abusers receiving residential treatment therapy have higher motivational levels than those in drug-free outpatient settings (Millar, Hayhurst, Jones, Pierce, Davies, Weston, Dunn & Donmall, 2014:165). The participants' need for their children to be admitted into

rehabilitation centres can be an indication of the lack of community-based mental health care services (Richardson & Van Brakle, 2011: 320). Intervention strategies to combat substance abuse include prevention, treatment, and after-care. The participants' extracts are biased towards treatment.

4.3.7.2 Sub-theme 7.2: Participants wanting their children to acquire any form of assistance from the social workers

Despite an unsuccessful encounter with the social workers, most participants were convinced their children can benefit from the social work intervention, as illustrated in the extracts below:

If the social workers can give us the direction and help us where we can take our child for help. That is all that we wanted; and I will be happy.

I would like the social worker to help my child to be the same that I know when he grew up.

I will appreciate if the social worker can give us the avenues whereby the child can be able to be in the program of people who can be rehabilitated that it is all. I will be very happy. We saw most of them, they go to the rehabilitation centres but when they come back they use drugs again.

I would like the social worker to come in my house during the week, maybe once in a week to counsel her, I am hoping that it might work. I remember the people from church they also deal with people who are struggling with drug abuse and what I can do is to force her so that she gets help. I will take her every week because if I can ask her to go by herself she might lie to me.

I will be pleased if the social worker can help him to be out of the drugs for good, though I do not know how are they going to do it because he already went to the rehabilitation centre four or three times. The first time he went to Randfontein rehabilitation centre, the second one somewhere on Cullinan, third one at Sterkfontein rehabilitation centre. You see now I am telling you about three rehabilitation centres that he attended where he did not even complete the treatment so; we do not know what else to do now.

I really need help. Social workers can take them and, I do not know what is going to happen. They do not want to work. They will work months and they left. I am tired. If they were helping me, it would be better. The other one is here in the house, she has a child. All of them they need my help and support.

I like the social worker to help him, rehabilitation centres are taking time because they said he has to attend sessions two times in a week before he could be referred to rehabilitation centre. So, my understanding is that it is taking too long unless if it is possible for them to speed up the process.

All of them they need sort of like counselling and then, that maybe can help. Sometimes I come to the stage where I wish they could just leave the house, but the question that comes to me is, but where are they going to go?

I have been to the police station, but the police they referred me to the social worker. So, the problem is, they do not want to go to the social worker. And then, I was informed that I must not force them. They should be willing to be helped and that is the problem I have.

I do not know how my girl can be helped because even if she goes to the rehabilitation centre it means that her brother should also go as they both using drugs [referring to his son who he said he is using drugs as well].

The narratives emphasise the participants' belief that social workers have a function in treating children, abusing illegal substances. Employing professionals to attempt drug problems amongst adolescence was also emphasised in previous studies as indicated by a participant, expressing the following sentiments (Alhyas et al 2015:7):

Last year my school had a psychologist come in twice a week to assist students who had problems like using drugs. She [the psychologist] assisted students deal with their problems better.

Social workers are in a privileged position where they can assist in addressing drug problems. In collaborations with communities, they can arrange useful education programmes to raise drug awareness (Sesane & Geyer, 2017:523).

4.3.7.3 Sub-theme 7.3: Government intervention concerning the availability of drugs for illegal substance abuse

To limit the drug trafficking within and across the borders, the South African government established strict policies (National Drug Master Plan). One participant expressed concern regarding the peddling of drugs by non-South Africans into the country, as encapsulated in the following extract:

If we wanted to stop the drugs, maybe our government has to implement new acts about people entering and leaving the country. We hear that they are brought in by Nigerians foreign nationals; some they say other people, so we do not know where they are coming from.

This extract depicts the strained relationship between the local South Africans and foreign nationals, most notably Nigerian immigrants. Since the birth of democracy in 1994, several migrants flocked to South Africa in search of economic opportunities. Allegations suggest that some immigrants are responsible for drugs and other criminal activities, such as human

trafficking. This sentiment was expressed by one participant in a previous study on ¹xenophobia (Jagganath, 2019:1):

They are heavily involved in the illicit trade in drugs, arms, and they are also accused of trafficking in goods considered to be fake, like counterfeit designer clothes and pirated DVDs.

In an attempt to explain the killing of 42 foreign nationals and displacement of the estimate 27 000 foreign nationals in Gauteng in 2008, another participant shared the following (Super, 2017:524):

Foreigners are more criminally inclined than South Africans and they get away with crime. We're also tired of white people thinking that we're criminals when these people are worse than us [...] What makes the foreigner so lucky and special? How do they get the houses, the jobs, the cars and the businesses because they can afford to pay jojo [bribes]. We're afraid to walk at night, because we fear being mugged by these people.

According to Martin (2010:65), the xenophobic sentiments are further exacerbated by escalating incidents of crime, a high unemployment rate and a stagnating local economy.

4.4 Conclusion

This chapter presents the research findings derived from the transcribed interviews with the 12 participants whose children abuse illegal substances. The biographical profile of participants was presented in the first section, followed by a discussion of seven themes with the sub-themes. Fifteen sub-themes, and three categories providing direct quotes from the transcribed interviews, whilst subjecting them to literature control.

The first theme focused on the participants' experiences of telltale signs of children's addiction. The participants' feelings about learning of their children's drug addiction were captured and presented in the second theme whereas the effects of the child's illegal

¹ Xenophobia may be described as "attitudes, prejudices and behaviour that reject, exclude, and vilify persons based on the perception that they are outsiders, foreigners to the community, society, or national identity (Jagganath, 2019:4).

substance abuse on family relationships and the addictive behaviour on the relationship between participant and child are presented in Themes 3 and 4, respectively. Themes 5 to 7 present mothers' involvement in addressing the child's illegal substance abuse, participants' coping strategies and participants' assistance suggestions. Chapter 5 provides a summary, conclusions, and recommendations from the study.

CHAPTER 5: SUMMARIES, CONCLUSIONS, AND RECOMMENDATIONS

5.1 Introduction

This chapter is the culmination of the research process, providing the qualitative research process, conclusions reached, and recommendations based on education, practice, and policy (Creswell, 2016:232). The chapter demonstrates how the study goals were attained. Summaries of the previous four chapters, followed by conclusions derived from the research process and the research findings based on three themes, are presented. The subsequent section focuses on recommendations on the qualitative research process, research findings, and suggestions for future studies.

5.2 Summary of the previous chapters

The study comprises five chapters; the previous four chapters are summarised as follows:

Chapter 1 provides a general orientation to the study. The background, problem statement, and motivation for the study are described with the support of relevant literature. The research questions and research goals derived from the topic are provided, followed by objectives guiding the inquiry. The qualitative research methods were briefly introduced, including ethical considerations guiding the study conduct. Ethical considerations comprise informed consent, confidentiality, anonymity, and information management. The main concepts utilised in the study are clarified to provide context and demarcation.

Chapter 2 provides an overview of the theories employed to understand substance addiction. The theories are presented according to the definition, main assumptions, main features, and how they are employed to explore and understand the experiences of parents whose children abuse illegal substances. The chapter presents the basic assumptions and the main features of each theory. A brief discussion is included on how fathers, parenting children, abusing illegal substances is conceptualised through various theories.

Chapter 3 provides a detailed description of the application of the qualitative research process. The chapter also orientates the reader on the chosen research paradigm and the justification of the relevance of the research methodology in accomplishing the goals of the study. A discussion on the application of the research designs, sampling methods, data collection methods, data analysis and data verification are presented.

Chapter 4 presents the biographical profiles of the participants with particular reference to their age, marital status, number of children, age of the children, abusing illegal substances, drugs used by the children, occupation, language and gender of the children. The research findings are presented, subjected to literature control.

5.3 Conclusions based on the research process

The conclusions based on the outcomes of the qualitative research process and the ethical considerations are provided below.

5.3.1 Research questions

The research questions for the study were formulated as follows:

- What are the experiences, challenges and coping strategies of fathers, parenting children, abusing illegal substances?

The participants' interpretations in this aspect are varied and inconclusive. Most participants experienced various negative feelings and emotional reactions such as anger, helplessness, disappointment, loss, shame, despair, confusion, frustration. Participants' experiences revealed they struggle to cope because they do not know what to do to assist their children, abusing illegal substances.

- How would fathers, parenting children using illegal substances, like to be supported by social workers?

Despite an unsuccessful encounter with the social workers, the findings reveal most participants were still convinced that their children can benefit from the social work intervention by assisting them with admitting the children to rehabilitation centres. The research questions were specific, concise, and researchable concerning developing an in-depth understanding of the experiences, challenges and coping strategies of fathers, parenting children, abusing illegal substances and their requirements for support by social workers.

5.3.2 Research goals and objectives

The study had two goals, specified as follows:

- develop an in-depth comprehension of the experiences, challenges and coping strategies of fathers, parenting children, abusing illegal substances and their requirements for support by social workers.
- suggestions regarding how fathers, parenting children, abusing illegal substances, could be supported by social workers.

The goals of the study were adequately achieved in Chapter 4 of this report; the findings were extensively presented. The research objectives of the inquiry were accomplished as elucidated below.

- A sample of participants comprising fathers, parenting children, abusing illegal substances, residing in the area of Kagiso in Gauteng, could be obtained. Permission was sought from the local authorities and it was duly granted.
- Face-to-face, semi-structured interviews with open-ended questions contained in an interview guide, with a sample of fathers, parenting children, abusing illegal substances, were obtained.
- The experiences, challenges and coping strategies of fathers whose children abuse illegal substances, and their requirements for support by social workers were explored.
- Data could be sorted and analysed, obtained according to the eight steps of qualitative data analysis constructed by Tesch (in Creswell, 2013:46).
- It was possible to describe the findings regarding the experiences, challenges and coping strategies of fathers, parenting children, abusing illegal substances, and their requirements for support by social workers.
- Data could be interpreted, whilst conducting literature control to support/confirm and/or contrast the research findings.
- It was possible to conclude and make recommendations on the experiences, challenges and coping strategies of fathers, parenting children, abusing illegal substances, with suggestions for social work support.

5.3.3 Research approach

Qualitative research was employed to obtain the participants' valuable and unique experiences. This approach was important in describing and interpreting the participants' experiences. The flexibility of qualitative research required a cyclical process, challenging but beneficial. Reflexivity enabled the study views based on the research conductor's

experience under constant check, and as a result, mitigating contamination of the participants' narratives during the presentation and interpretation of the findings.

5.3.4 Research design

Phenomenology, exploratory, descriptive, and contextual research designs were applied in the following manner:

- The **phenomenological research design** facilitated an exploration of the participants' subjective meaning and understanding of the experiences, challenges and coping strategies of fathers, parenting children, abusing illegal substances and their requirements for support by social workers.
- Attributable to limited knowledge and understanding the experiences and challenges of fathers, parenting children, abusing illegal substances, the **exploratory research design** helped explore the participants' experiences.
- The **descriptive research design** enabled descriptions of the participants' experiences, based on the areas explored during the research process. These descriptions were compared and contrasted with existing literature.
- The **contextual research design** enabled the participants to share their realities, influenced by their different context.

5.3.5 Ethical considerations

The prescribed ethical considerations, such as informed consent, confidentiality and anonymity, protecting participants from harm, and information management, were observed during the study. All the participants consented to participate in the study, whilst they were assured of anonymity and confidentiality observed by employing letters of the alphabet as codes to conceal their identity. Although measures were established to ensure participants' identities are not revealed, it is challenging to guarantee anonymity as the involvement of gatekeepers may compromise such guarantee. The study would be published in print and electronic media.

5.4 Conclusions based on the research findings

Conclusions from the findings are presented below according to the participants' biographical profiles and themes.

Participants' biographical profile

The participants' biographical profiles reveal the following:

- Participants' marital status: all participants, except one who lost his partner, were married at the time of the study.
- Age of children substance abuse: Most participants' children reported substance abuse, are in the emerging adulthood stage.
- Drugs used by the children: Eight of the participants' children were reported to abuse a drug called *nyaope*.
- Participant's occupation: Four of the participants were unemployed, six were employed, whereas three were pensioners.
- Gender of the children: Nine of the participants' children were males. Four of the participants' children were females.

5.4.1 Theme 1: Participants' experiences of telltale signs of children's addiction

- Most youths, abusing illegal substances, are involved in petty offences such as stealing from their families to support their habit.
- Most participants reported a confirmation for them of the reality of the children's addiction was stealing the most basic appliances from their household and neighbours, selling goods for funds to buy drugs.
- The participants' explanations confirm the assertion that drug abuse perpetuates the crime and other illegal activities, enabling the users supporting their drug habits.
- Illegal substance abuse is often associated with multiple reoffending.
- The extracts are consistent with previous findings that substance abuse holding increased economic and social costs for society, as the majority substance abusers steal from their families and neighbours. This behaviour can destroy the parents' relationship with neighbours, as some may perceive this behaviour as the moral failure of the parents to raise the child.
- Due to high levels of crime, community members, particularly in townships resort to dealing with crime through informal and often illegal criminal justice mechanisms by *sjambokking* (beating) delinquent youth.

- Some participants mentioned the change in general behaviour changes including the children's hygiene.
- The social environment or context where peer affiliation occurs can also be an important indicator of in understanding the children's behaviour. The strongest predictor of substance abuse during adolescence is the type of behaviour that their friends engage in.
- Personal observations and reports from others about the child smoking substances that influence their behaviours.
- Adolescents illegal substance abuse are normally displaying aggressive and violent behaviours towards their families and community members, although not necessarily whilst they are under the influence of drugs.

5.4.2 Theme 2: Participants feelings about learning of their children's drug addiction

- The participants' narratives reveal that discovering the child is illegal substance abuse is likely to trigger various negative feelings and emotional reactions, such as anger, helplessness, disappointment, loss, shame, despair, confusion, frustration, worry, embarrassment, stress, sadness, hurt, pity.
- The findings reveal the participants' stress and concern about what would happen to their children when they die.
- Parents are willing to "go the extra mile", such as sacrificing their lives if it indicates it will discourage their children from illegal substance abuse.
- Parents associate substance abuse with neglectful parenting since they perceive as failing to guide the children, resulting in decreased self-worth, hopelessness, sadness and depression and contempt towards oneself.
- Children's drug abuse often brought shame and embarrassment to parents because of their social standing in the community.

5.4.3 Theme 3: Effect of the child, abusing illegal substances, on family relationships

- Excessive use of illegal substance contributes to the destruction of family relations.
- Drug dependence by one family member is a "disease that disrupts the entire family system".

- Illegal substance abuse by a family member may change how families relate to each other.

5.4.4 Theme 4: Effect of addictive behaviour on the relationship between participant and child

- Although it is the perception that parents supportive of their children may protect them against substance use, the findings reveal children continue to abuse illegal substances.
- Children, abusing illegal substances can negatively influence their relationships with participants.
- Contrary to the widely-held assertion that socio-economic standing of adolescence can be a risk factor for substance use, the participants' narratives strongly suggest a weak or no correlation between the family's economic status and substance-abuse by children.
- Substance abuse by children may be influenced by the quality of their relationship with the parents since children who do not enjoy a close relationship with their parents are more prone to engage in risky behaviour, such as substance abuse.

5.4.5 Theme 5: Mothers' involvement in addressing the child's illegal substance abuse

- Mothers assume the function of primary caregiver.
- Mothers carry the heavier burden and pressure from society, expected to be successful in their multiple functions within the family as primary caregivers.
- Notwithstanding incidents of parental disagreements, the common thread revealed by the narratives is that participants appreciate having someone to share the responsibility with.
- The participants' interpretations reveal the emotional and spiritual support they receive from their spouse.
- Most importantly, the findings reveal varying parentings, expectations and attitudes amongst parents in how they respond to their child using drugs.
- Spiritual support provides driving force to provide person stability, meaning, fulfilment in life and faith in self. Some of the participants' mothers relied on divine intervention for strength.

- This storyline reveals the belief that some individuals have in God and the extent to which they feel the guidance of God is necessary to assist with their problems. Individuals resort to prayer to pursue meaning in life. It, therefore, has a positive impact on pain, anxiety, decreasing depression, coping skills and enhancing the quality of life.
- Some participants acknowledged the important function of their spouses and consult with them regarding their substance-abusing child.
- Parental supervision and monitoring the children's peers can reduce the amount of time that the child spends with friends.
- Substance abuse amongst adolescents harms the relationship between mothers and their adolescent children, which often left mothers frustrated and angry.
- Parents are likely to engage in different types of parenting with their children. The parental disagreements on how to respond to the child using drugs are inevitable; thus, influencing the marriage negatively.
- Some parents experience the feeling of powerlessness by the mothers when nothing they attempted was effective.

5.4.6 Theme 6: Participants' coping strategies

- Participants' experiences revealed struggles to cope because they do not know what to do anymore to support the children. They use phrases such as "a big burden", "struggling", have "sleepless nights" acknowledging their incapacity to cope.
- Socio-economic factors, such as parents' employment status hardships can influence how parents raise their children. The coping abilities of some participants are constrained by their employment status.
- Most participants attempted to acquire professional assistance for the children's addictive behaviours but their efforts failed. The relapse phenomenon was attributed to several factors, such as substance abusers lacking motivation to receive treatment for various reasons, including unfavourable home circumstances, which might contribute to the relapse, the influence of the users' gender on individuals' motivation to pursue, enter, and complete treatment.
- Although social workers are core members of the multi-disciplinary team in rehabilitation centres, their contribution to substance abuse treatment seems to be inadequate.
- Social workers are often unsure of their function in cases involving social abuse concerns. The authors concede that social workers' understanding of change

concerning substance abuse is important and it should be considered concerning relapse.

- Some participants indicated not having consulted professionals either from ignorance or the assistance they received was unsatisfactory.

5.4.7 Theme 7: Participants' suggestions on how they require assistance

- Most participants expressed the need for the child using drugs to be admitted into rehabilitation centres for treatment.
- Despite an unsuccessful encounter with the social workers, most participants were still convinced that their children can benefit from the social work intervention.
- The findings emphasise the participants' perception that social workers have a function in treating children, abusing illegal substances.
- The findings depict the strained relationship between the local South Africans and foreign nationals, most notably Nigerian immigrants.

5.5 Recommendations

5.5.1 Recommendations for practice

- Provided the participants' reluctance to pursue professional assistance from social workers, it is recommended that social workers engage in awareness programmes to educate communities concerning their function in the lives of children who abuse substances.
- Considering parents' continued essential function in preventing substance by their children, it is recommended that social workers adopt more family-based therapy approaches to address problems, such as poor or strained family communication, often witnessed in families where a family member is a substance abuser.
- Considering the complex and individual experiences shared by the participants, it is recommended that social workers diverge from one-size-fits-all interventions and design intervention strategies, tailored for individual clients and families.

5.5.2 Recommendations for policy review

- Because of the criminal activities, witnessed amongst adolescents' using illegal substances, it is recommended that the Department of Social Development as the

custodian of The Prevention and Treatment for Substance Abuse Act, 70 of 2008, facilitate the engagements pursuing to strengthen the inter-ministerial committee to combat substance abuse.

- Provided the participants' expressed need for the users to be admitted in rehabilitation centres, it is recommended that the Department of Social Development strengthen community-based initiatives to manage substance abuse.

5.5.3 Recommendations for education

The study recommends that the social work curriculum should include a separate module focusing on substance abuse provided the inconclusive findings on the effectiveness of the social work interventions in dealing with substance abuse.

5.5.4 Recommendations for further and future research

Provided the parents' emotions of guilt and self-blame, it is recommended that more studies be conducted on the relationship between parenting and children engagement in risky behaviour such as substance abuse.

5.6 Conclusions

This chapter presents summaries and an overview of the qualitative research method as presented in the first two chapters. A summary of the major research findings according to the four themes, ensued by conclusions and recommendations based on the research findings, are provided. The discussion resulted in the presentation of recommendations for further research concerning practice policy and education.

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ADDENDA

ADDENDUM A: REQUEST FOR THE INDIVIDUAL'S PARTICIPATION IN THE RESEARCH

TITLE OF THE RESEARCH PROJECT: THE EXPERIENCES, CHALLENGES AND COPING STRATEGIES OF FATHERS, PARENTING CHILDREN, ABUSING ILLEGAL SUBSTANCES: SUGGESTIONS FOR SOCIAL WORK SUPPORT

INVESTIGATOR/RESEARCHER: Mmathato Calphurnia Matheba

ADDRESS: 14 Elize Street, Birchleigh North, Kempton Park

CONTACT NUMBER: 078 138 4846

DECLARATION BY OR ON BEHALF OF THE PARTICIPANT:

I, the undersigned, (name), _____

[ID No: the participant or in my capacity as _____ of the
participant ID No _____ of

(Address)

A. HEREBY CONFIRM AS FOLLOWS:

1. I/the participant was invited to participate in the above research project being undertaken by MMATHATO CALPHURNIA MATHEBA of the Department of Social Work at the University of South Africa.

2. The following aspects were explained to me/the participant:

2.1. Aim: The investigator(s)/researcher(s) are studying the experiences, challenges and coping strategies of fathers, parenting children, abusing illegal substances.

The information will be used to develop an in-depth understanding of challenges experienced by fathers, parenting children, abusing illegal substances, and how are they coping with such challenges in their households.

2.2. I understand that I were selected as a part of this study attributable to my knowledge and experience regarding the topic being researched. I am also aware of the importance of this study and will do my best to furnish the researcher with accurate and useful information.

2.3 I understand that the researcher has taken great care in ensuring that her study is not harmful to my being and that the researcher will ensure that I receive counselling/debriefing should it be necessary. With this knowledge, I am confident that my participation will not result in any increased risk and that plans in place to mitigate any potential risks that may arise.

2.4 As a result of my participation in this study, no financial benefits that will be taken to me and that my participation is voluntary and is from my interest in improving my profession.

2.5 My identity will not be revealed in any discussion, description or scientific publications by the investigators/researchers.

2.6 Any new information/benefit that develops during the course of the study will be shared with me.

2.7 My participation is voluntary. My decision whether or not to participate will in no way influence me now or in the future.

The information above was explained to me/the participant by _____ in English/Tswana/Sepedi/Sotho/Zulu/other _____ (indicate other language) and I am in command of this language/it was translated to me satisfactorily by _____.

I was provided the opportunity to ask questions and all these questions were answered satisfactorily.

2.8 No pressure was exerted on me to consent to participate and I understand that I may withdraw at any stage from the study without any penalty.

2.9 Participation in this study will not result in any additional cost to me.

I HEREBY CONSENT VOLUNTARILY TO PARTICIPATE IN THE ABOVE PROJECT.

Signed/confirmed at on 20_____

Signature or right thumbprint of participant_____

Signature of witness_____

ADDENDUM B: REQUESTION DEBRIEFING

TO: Mrs Sannie Ndhlovu

Re: Letter for Requesting Debriefing

My name is Calphurnia Matheba and I am currently registered for a Master of Social Work degree at the University of South Africa, with the student number: 3665-382-9. In the study, I am required to conduct research and write a research report. In that regard, I am requesting that you help me with the debriefing of my research participants, should it become necessary for them to receive such debriefing. The research title is: **THE EXPERIENCES, CHALLENGES AND COPING STRATEGIES OF FATHERS PARENTING CHILDREN USING ILLEGAL SUBSTANCES: SUGGESTIONS FOR SOCIAL WORK SUPPORT.** The research study will be qualitative in nature and the use of interviews as a data collection method will be applied. The research will be conducted in Kagiso, Krugersdorp area in the Westrand of Gauteng.

The goal of the research is as follows:

- To develop an in-depth understanding of the experiences and challenges experienced by fathers who are parenting children using illegal substances.

The research study will only be conducted after the approval of the Unisa Research and Ethics committee which follows strict ethical guidelines and ensures that research participants are protected from harm. Your experience in the social work field makes you a suitable individual to conduct the debriefing of research participants, as you are familiar with the social work methods and with the fact that you are also based in Kagiso for a very long time you are familiar with the area and its challenges.

Should you be willing to help me in this regard, please accept my request in a formal letter as I have to prove that I have engaged you in this regard. If you have any further enquiries, please do not hesitate to contact me. Your assistance in this regard will be appreciated.

Kindest regards

Ms Calphurnia Matheba
Master of Social Work Student
078 138 4846/072 874 0600
mathebacalifornia@gmail.com

ADDENDUM C: CONSENT FORM REQUESTING PERMISSION TO PUBLISH INFORMATION

As part of this project, I have made an audio-recording of you. I would like you to indicate (with ticks in the appropriate blocks next to each statement below) what uses of these records you are willing to consent to. This is completely up to you. I will use the records only in ways that you agree to. In these records, names will not be identified	Place a tick [✓] next to the record you consent to
The records can be studied by the research team and quotations from the transcripts made of the recordings can be used in the research report.	
The quotations from the transcripts made of the recordings can be used for scientific publications and/or meetings.	
The written transcripts and/or records can be used by other researchers.	
The records and quotations from the transcripts made of the recordings can be shown/used in public presentations to non-scientific groups.	
The records can be used on television or radio.	
<div style="border-bottom: 1px solid black; height: 20px; width: 150px; margin-bottom: 10px;"></div> Signature of participant	<div style="border-bottom: 1px solid black; height: 20px; width: 150px; margin-bottom: 10px;"></div> Date

ADDENDUM D: PERMISSION TO CONDUCT INTERVIEWS

Dear Sir/Madam,

I, Mmathato Calphurnia Matheba, the undersigned, I am a master's degree student in the Department of Social Work at the University of South Africa. In partial fulfilment of the requirements for the master's degree, I have to undertake a research project and have consequently decided to focus on the following research topic: The experiences, challenges and coping strategies of fathers, parenting children use illegal substances: suggestions for social work support

I have decided to conduct a research project on this topic resulting from my observation that there is little research conducted regarding challenges experienced by fathers, parenting children abusing illegal substances; in that case I am requesting your permission to do my research in your Ward 9 here in Kagiso. The participants were identified. The researcher cannot proceed with the research project unless permission to work in this Ward is granted from you as the Counsellor of the Ward.

Kind regards

Ms Calphurnia Matheba

Researcher

Contact details: 078 138 4846/072 874 0600

Email: mathebacalifornia@gmail.com

ADDENDUM E: PERMISSION TO CONDUCT INTERVIEWS (MOGALE CITY)



Mogale City
Local Municipality

MINUTE

FROM OFFICE OF THE COUNCILLOR

WARD 06

REF: M.P.J MADUMO

CONTACT NO.: 082 758 4023

DATE:

TO: **WHOM IT MAY CONCERN**

Sir/Madam

I hereby, in my capacity as the ward councillor for ward 06, give consent to Matheba Mmathato Calphurnia, Student number: 3665-382-9, to conduct an investigation in my ward, as she embarks on a research topic: 'THE EXPERIENCES, CHALLENGES AND COPING STRATEGIES OF FATHERS PARENTING CHILDREN USING ILLEGAL SUBSTANCES'.

This will assist me with information I need to be of assistance to my community.

Hoping the above is in order.

Thanking you in anticipation.

A handwritten signature in black ink, appearing to be 'M.P.J. Madumo'.

Cllr M.P.J. Madumo

Ward 06

0827584023

ADDENDUM F: STATEMENTS AND DECLARATIONS

STATEMENT BY OR ON BEHALF OF INVESTIGATOR(S)	
<p>I,, declare that I have explained the information provided in this document to _____ (name of participant);</p> <p>he/she was encouraged and provided ample time to ask me any questions.</p> <p>This conversation was conducted in English and no translator was used.</p> <p>Signed at _____ on _____ 2016____</p> <p>(place) (date)</p>	
_____ Signature of investigator/representative	_____ Signature of witness

ADDENDUM G: ETHICAL CERTIFICATE



DEPARTMENT OF SOCIAL WORK RESEARCH AND ETHICS REVIEW COMMITTEE

29 January 2018

Ref# D&EC. 21/11/17/38653829_16
Name of Applicant: Matheba, MC
Student#: 38653829

Dear Ms MC Matheba

DECISION: ETHICAL APPROVAL

Name: **Ms MC Matheba**

Address & contact details: **14 Elize Street, Birchleigh North, Kempton Park**

Cell phone number: **073 138 4846**

Supervisor: **Dr NP Kgadima**

Title of Proposal: **THE EXPERIENCES, CHALLENGES AND COPING STRATEGIES OF FATHERS PARENTING CHILDREN USING ILLEGAL SUBSTANCES: SUGGESTIONS FOR SOCIAL WORK SUPPORT**

Qualification: **Master of Social Work**

Thank you for the application for research ethics clearance by the Department of Social Work Research and Ethics Review Committee.

The application was reviewed in compliance with the UNISA Policy on Research Ethics by the abovementioned Committee at a meeting conducted on 21 November 2017.

Final approval is granted for the duration of the project.

The proposed research may now commence with the proviso that:



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ADDENDUM H: EDITING CERTIFICATE – ACADEMIC AND PROFESSIONAL EDITING SERVICES



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LANGUAGE EDITING CERTIFICATE

Research report title: The experiences, challenges and coping strategies of fathers, parenting children, abusing illegal substances: Suggestions for social work support

Author: Ms Matheba Mmathato Calphurnia

Institution: UNISA

Date Issued: 2020/05/30

This document certifies that the manuscript listed above was edited for proper English language, grammar, punctuation, spelling, and overall style. Neither the research content nor the author's intentions were altered in any way during the editing process. Documents receiving this certification should be English ready for publication; however, the author has the ability and choice to accept or reject our suggestions and changes.

If you have any questions or concerns about this document or certification, kindly contact Elizabeth Marx at info@apespro.com.

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SARIMA



(NY, USA)